

PARENT ORIENTATED SEX EDUCATION FOR PRE-SCHOOL CHILDREN

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DECLARATION

I, the undersigned, hereby declare that the work contained in this thesis is my own original work and that I have not previously in its entirety or in part submitted it at any university for a degree.

SUMMARY

The aim of the study was to present guidelines for the composition of a parent orientated sex education programme for pre-school children. An exploratory study was undertaken to describe and investigate the nature and extent of parental sex education to pre-school children. The investigation was done by first exploring existing research literature and describing it. The empirical study was based upon both the literature study and mothers' opinions on sex education.

Pre-school children are disproportionately more likely to be sexually abused with devastating consequences which result in behavioural and emotional problems throughout their lives. The ultimate responsibility of prevention of child sexual abuse should be with the parent. However, two problems persist. Firstly, parents are often the perpetrators and therefore it is not justified to leave the responsibility solely to the parents. Secondly, parents who want to teach their children prevention strategies often lack the skills and knowledge.

Therefore, the concept of a prevention structure in which the child can live and find support should be put into practice by the school. Prevention strategies should include sex education, a neutral home environment and a safe environment for disclosure of sexual abuse. This prevention structure should include the teacher, the social worker and the parent. These three components should support each other to implement an atmosphere of prevention and healthy sexual development. Linking

and inter-dependence are important because there is always a possibility that one of the participants may be corrupt.

Social workers should provide an effective basis for a personal safety programme to parents which should be supported and facilitated by schools. Training parents to become sex educators encourages better parent-child communication, builds the family support network, and has an impact on the ability of the family to deal more positively with sexual concerns. This does not only result in the prevention of sexual abuse but also contributes to the healthy sexual functioning, development and understanding of the sexuality of pre-school children. Through parent orientated sex education, parents can also dispel sexual myths and misinformation that their pre-school children gain from peers and other sources.

Despite the increasing public awareness devoted to sexual abuse and the advantage of sex education, a formal prevention education structure has not yet been implemented for pre-school children in South Africa.

The first objective of this study was to describe and investigate the extent of parental sex education presented to pre-school children. The second objective was to investigate the acceptability of a sex education programme for pre-school children. The third objective was to describe the physical and sexual boundaries existing in the home environments of parents of pre-school children and finally to determine the sexual behaviours of pre-school children, which parents regard as acceptable.

The main conclusions, based on the findings of the study, indicated that parents were in favour of sex education for pre-school children and that they require more information which would empower them to sex educate their pre-school children at home. They were also in favour of a classroom-based sex education programme.

In conclusion it is recommended that a sex education programme is to be implemented at pre-schools for parents of pre-school children, as well as a classroom based sex education and a personal safety programme for pre-school children.

OPSOMMING

Die doel van die navorsing is om moontlike riglyne vir 'n ouer-georiënteerde seksopvoedingsprogram vir pre-primêre kinders saam te stel. 'n Verkennende studie is onderneem om die omvang en aard van ouer-georiënteerde seksopvoeding vir pre-primêre kinders te ondersoek. Verder is bestaande navorsingsliteratuur bestudeer en beskryf. Die empiriese ondersoek wat daarop volg, is gebaseer op sowel die literatuurstudie as moeders se menings oor seksvoorligting.

Pre-primêre kinders het 'n groter kans om seksueel gemolesteer te word wat kan lei tot die ervaring van emosionele- en gedragsprobleme, met vernietigende gevolge vir die res van hul lewens. Die uiteindelijke verantwoordelikheid om die kind teen molestering te beskerm, berus by die ouers. Dit skep egter twee probleme. Ten eerste is die ouer dikwels self die oortreder en daarom kan die verantwoordelikheid nie uitsluitlik by die ouer berus nie. Tweedens, is die ouers wat wel seksopvoeding aan hul kinders wil bied, dikwels weens 'n gebrek aan kennis en vaardighede, onbevoeg om dit te doen.

Dit is daarom die skool se verantwoordelikheid om 'n voorkomende struktuur te skep waarin die kind kan leef en ondersteuning kan vind. 'n Voorkomende strategie moet seksvoorligting, 'n neutrale leefruimte sowel as 'n veilige omgewing vir die bekendmaking van seksuele molestering insluit. Hierdie voorkomende struktuur moet die onderwyser, die maatskaplike werker en die ouer betrek. Hierdie drie

komponente moet mekaar ondersteun om 'n atmosfeer van voorkoming en gesonde seksuele ontwikkeling te implimenteer. Aangesien die integriteit van die partye nie gewaarborg kan word nie, is noue skakeling en interafhanklikheid van die drie komponente belangrik.

Maatskaplike werkers behoort 'n effektiewe persoonlike veiligheidsprogram, wat deur die skool ondersteun en gefasiliteer word, aan die ouers te voorsien. Ouers as seksvoorligters bevorder die kommunikasie tussen ouer en kind, verstewig die ondersteuningsnetwerk van die gesin en ontwikkel die vermoë om seksuele aangeleenthede openlik te hanteer. Gevolglik word seksuele molestering voorkom en gesonde seksuele funksionering bevorder. Die ouer verkry ook insig in die seksuele ontwikkeling van die pre-primêre kind. Deur middel van ouer-georiënteerde seksvoorligting, kan ouers mites en verkeerde inligting, wat dikwels deur die portuurgroep oorgedra word, regstel.

Ten spyte van die toenemende mediadekking en bewuswording van die voordeel van seksopvoeding, is daar nog geen formele opvoedkundige voorkomende veiligheidsprogram in Suid-Afrika geïmplementeer nie.

Die eerste doelwit van die studie was om die omvang en aard van pre-primêre kinders se seksuele opvoeding te ondersoek. Die tweede doelwit was om ouers se aanvaarding van seksvoorligting van pre-primêre kinders te ondersoek; die derde doelwit was om die fisiese en seksuele grense in die huislike omgewing te ondersoek en laastens, om aanvaarbare seksuele gedrag van pre-primêre kinders te ondersoek.

Daar word tot die gevolgtrekking gekom dat ouers wel ten gunste is van ouer-georiënteerde seksvoorligting vir pre-primêre kinders en dat hulle die behoefte het aan leiding om dit te doen. Die ouers is ook ten gunste van die aanbieding van seksvoorligting in die klaskamer.

Daar word aanbeveel dat 'n veiligheidsprogram, wat 'n ouer-georiënteerde seksvoorligtingsprogram vir ouers van pre-primêre kinders, sowel as seksvoorligting in die klas behels, in skole geïmplimenteer moet word.

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Appendix 1 : Questionnaire

CHAPTER 1

Introduction

1.1 MOTIVATION FOR THE STUDY

Pre-school children are disproportionately more likely to be sexually abused with devastating consequences, many of whom carry enormous feelings of guilt and responsibility for their victimisation, which result in behavioural and emotional problems throughout their childhood and adult lives (Ceci and Huffman, 1997).

The ultimate responsibility of prevention of child molestation should be with the parent of the pre-school child. However, two problems persist. Firstly, parents are often perpetrators and therefore it is not justified to leave the responsibility of prevention solely to the parents. Secondly, parents who want to convey prevention strategies to their pre-school children, very often lack the skills and knowledge (Schutte, 2000).

Despite the increasing public awareness devoted to sexual abuse and the advantage of sex education, a formal prevention education structure has not been implemented for pre-school children in South Africa. Schutte (2000:9) suggests that the concept of a prevention structure in which the child can live and find support should be put into practice. The prevention structure should include the teacher, the social worker and

the parent. These three components should support each other by sharing information and being available to the pre-school child.

Education of the influential people surrounding the child, such as teachers and parents, is extremely important. As a united team, teachers and parents need to implement a sex education and personal safety programme for pre-school children. Only by this united effort can an atmosphere of prevention be implemented. Schutte (2000:9) refers to Daro (1991:3), who claims that when teachers and parents work together, a safer environment is created for children. An effective parent orientated sex education programme should be available to parents and teachers to assist them in creating a safer environment for pre-school children.

Baldwin and Bauer (1994) assert that parent orientated sex education limits sexual victimisation and enhances responsible sexual attitudes and healthy sexual development. Harman and Johnson (1993) indicate that parents have to provide their children with accurate sexual information in a comfortable, timely manner because it is essential to a young child's sexual development.

Parents are the most important force in the development of sexual communication and values in their children, and it is therefore important that an effective sex education and personal safety programme is implemented to support parents in their role as primary sex educators. Many parents would prefer to be the sex educators of their children, but their preference is often inconsistent with their conduct. To contribute to the healthy sexual development of their children, parents need the support and high regard of teachers and social workers. When parents do not

address their children's sexual development and sexual education, or their home environment undermines healthy sexual development, social workers are frequently required to respond to sexual molestation or improper sexual activities and exploration by pre-school children.

In her capacity as a registered social worker and certified play therapist, the researcher is contracted by pre-schools to intervene when pre-school children show symptoms of sexual abuse or problematic sexual behaviour. According to experts (Friedrich, 1994; Gil and Johnson, 1993; Johnson, 1995), problematic sexual behaviour amongst pre-school children include oral sex, attempts of sodomy and vaginal intercourse, attempts at penetration of the anus or vagina of peers with foreign objects, digital sex (stimulating another child's vagina with finger) and excessive masturbation. The researcher recognized that subsequent to a crisis intervention by the researcher at a pre-school, she would be requested to facilitate a personal safety programme for teachers and parents. A motivating factor for embarking on this study is the researcher's experience of the apparent increase in molestation amongst pre-school children and the request from parents for assistance in facilitating sex education and a personal safety programme for their pre-school children.

The researcher's contact with victims of sexual abuse has generated a further interest in the value of sex education for pre-school children, as it became clear that child victims and child perpetrators lack sexual knowledge and guidelines regarding the basic themes of prevention. It also became apparent to the researcher that

parents are unaware that the home environment can stimulate child perpetrators into molesting peers.

Addressing the issue of pre-school children presenting problematic sexual behaviours at pre-school, it became evident to the researcher that some teachers minimise such behaviours and discourage parents to disclose the sexual activities between the children. These teachers assume that disclosing the sexual behaviours of pre-school children could cause parents to remove their children from the pre-school.

It is clear to the researcher that there is a need for social workers to provide a more effective basis for a personal safety programme to parents and teachers. These programmes should be available on a continuous basis in order to support the different systems when they need information.

Baldwin and Bauer (1994) assert that training parents to become sex educators encourages better and more frequent parent-child communication, builds the family support network, and has an impact on the ability of children and families to deal more positively with sexual concerns. Through parent orientated sex education, parents can dispel sexual myths and misinformation that their children gain from peers and other sources. Parent orientated discussions about sex and sexual values may encourage children to identify positively with the values of their parents.

1.2 MOTIVATION FOR THE STUDY FROM A PRACTICE PERSPECTIVE

Research (Erooga and Masson, 1999; Gil and Johnson, 1993) indicates that there has been an increase in the number of children demonstrating problematic sexual behaviour. The researcher has experienced a growing number of pre-school children showing problematic sexual behaviour, as well as teachers from pre-schools inquiring about advanced and victimising sexual behaviour amongst pre-school children.

To validate the opinion of the researcher, she conducted a pilot study on the sexual behaviours of pre-school children. Questionnaires regarding the prevalence of sexual behaviour amongst pre-school children were administered to principals of four selected pre-schools in a radius of 10 kilometres in the southern suburbs of Cape Town. The Child Sexual Behaviour Inventory was used to evaluate the sexual behaviours of the pre-school children. This inventory was designed by Dr. William Friedrich (1991) to use when a child has been engaging in sexual behaviours with other children. The following sexual behaviours amongst pre-school children were examined: oral sex amongst pre-school children; sodomy; vaginal sex; penetration of genitals with object; excessive masturbation; group masturbation; touching the genitals of friends; kissing; simulating sex with dolls; simulating sex with peers and exhibiting genitals to peers. The principals of the pre-schools had to indicate which behaviours are on the increase and which behaviours remained consistent or were absent. Based on their observations of the behaviour of the children the results indicated that the following sexual behaviours are on the increase: simulating sex

with dolls; touching the genitals of friends; kissing peers; masturbating; exhibiting genitals to peers; penetration of genitals with object and simulating sex on peers. The remaining sexual behaviours remained consistent. These statistics validated the assumption of the researcher that there is an increase in sexual behaviour amongst young children in the pre-schools in the southern suburbs.

By word of mouth, the researcher became known to schools in the southern suburbs of Cape Town and on request she facilitates a personal safety programme for parents of pre-school children. This programme empowers parents to sex educate their pre-school children and to educate them on sexual abuse. The researcher has noticed an increasing demand to facilitate this personal safety programme to parents of pre-school children. However, little research has been done on effective programmes to prevent sexual abuse for pre-school children in South Africa.

The ultimate responsibility for prevention of molestation should be with the parent of the pre-school child. However, Schutte (2000:9) suggests that the prevention structure should involve both the parent and the teacher, because the task of prevention cannot be placed on only one participant. Linking and inter-dependence are important because there is always a possibility that one of the participants may be corrupt. Training parents as sex educators should be supported and facilitated by social workers to enable parents to deal more positively with sexual concerns. In the role of facilitating information to parents, social workers can play a valuable role in contributing to the healthy sexual functioning of pre-school children and the development and understanding of sexuality. If parents decide to participate in training programmes and responsibly educate their pre-school children about sex,

their positive example and sex education would assist their children towards healthy sexual functioning and also prevent molestation.

1.3 AIM AND OBJECTIVES

The aim of the study was to present guidelines for the composition of a parent orientated sex education programme for pre-school children.

The following objectives have been formulated to achieve this aim:

To describe and investigate the nature and extent of parental sex education presented to pre-school children.

To investigate the acceptability of a sex education programme for parents of pre-school children as part of the school curriculum.

To describe the physical and sexual boundaries existing in the home environment of parents of pre-school children.

To determine the sexual behaviours of pre-school children which are regarded by parents as acceptable.

1.4 DEMARCATION OF THE FIELD OF RESEARCH

In her capacity as a social worker the researcher is rendering services in the southern and northern suburbs of Cape Town in the Western Cape. The researcher selected four pre-schools in the southern and northern suburbs of Cape Town to do the survey. This area was chosen because it was accessible to the researcher. The target group was parents from the four pre-schools to which the researcher had access. In her capacity as social worker the researcher is known to the principals of the selected pre-schools. The pre-schools were selected for the sample because parent meetings were scheduled at the time the researcher planned to execute the study.

1.5 RESEARCH METHODOLOGY

For the purpose of this investigation a literature study and an empirical study were undertaken.

1.5.1 Literature study

South African and international literature on sex education, from a social work perspective, as well as from related fields, have been consulted. Literature on sex education from related disciplines such as psychology, psychiatry and developmental behavioural paediatrics provided valuable insights.

Articles, journals and books relevant to the subject were obtained from different libraries and these proved to be valuable reference resources.

1.5.2 Empirical study

To accomplish the aim and objectives of this study an exploratory and descriptive study was undertaken. Rubin and Babbie (1993:256) maintain that an exploratory research acquaints the researcher with the characteristics of the research target. The principal objective is to improve the concepts and develop questions and hypotheses for further research. Rubin and Babbie (1993:257) assert that the main conditions for exploratory research is imperfect knowledge about a phenomenon. Conclusions from the exploratory research project can be accumulated for future experimental or descriptive studies. In accordance with this statement and considering the lack of research on parent orientated sex education for pre-school children, this research project would, on completion, be described as exploratory.

The size of the study population was 210 mothers of pre-school children from the four pre-schools in the demarcated area in the southern and northern suburbs. Only 83 (39,5%) mothers in the study population of 210 completed the questionnaire. The researcher consequently relied on data obtained from this available sample selected from the study population (210) i.e. 83 mothers with pre-school children.

A non-probability sampling method i.e. availability sampling, was used to select a sample. Rubin and Babbie (1993:270) maintain that availability sampling consists of the first available appropriate sampling units. In her capacity as a social worker and facilitator of a personal safety programme to pre-schools, the researcher is currently known to several pre-schools in the southern and northern suburbs of Cape Town.

The researcher selected the first four available pre-schools from the 131 in the area of the southern and northern suburbs of Cape Town, which scheduled parent meetings during the time the researcher planned to execute the study. The questionnaires were distributed to the parents of pre-school children at the parent meetings of the four pre-schools. The questionnaires were completed by the mothers and collected by the researcher before the parent meetings commenced. Grinnell (1988:251) maintains that a non-probability sample can be used where the expense of probability sampling is too much and where less than exact representation of the population is temporarily permitted. Non-probability samples are suited to exploratory studies, where the researcher is merely interested in acquiring as much data on a research question as possible.

The researcher compiled one survey questionnaire in order to assemble the empirical data. The questionnaire was not compulsory. An anonymous self-administered questionnaire was used. Rubin and Babbie (1993:250) state that self-administered questionnaires are effective in dealing with sensitive issues. Grinnell (1988:195) maintains that quantitative methods are best suited in trying to establish cause-effect relationships between variables or to describe relatively straightforward issues. This is relevant especially as the survey offers complete anonymity in situations where respondents can be reluctant to report sensitive or controversial opinions and behaviours in interviews. The respondents' compliance to participate in this study was thus of paramount importance to obtain the data required.

The questionnaire was distributed to approximately 210 mothers with pre-school children. The questionnaire was formulated in English. In order to gather the

necessary information, both open and closed ended questions were utilised in the research instrument.

Quantitative research methods were generally applied in the execution of the research. The aim and objectives of this study made limited utilisation of qualitative data possible in order to describe the social realities and to study a relatively unknown area. Quantitative research methods were used to count the occurrence of specified features and to gather data from parents of pre-school children with the help of self-administered questionnaires and to obtain statistics from the data gathered.

The investigation, including the processing of data of the research findings, were completed during October/November 2000. Tables and figures were used to facilitate the interpretation of findings which will be presented in a descriptive manner.

1.6 DESIGN OF THE INVESTIGATION

This research report is divided into six (6) chapters.

In Chapter 2 the physical and emotional development of the pre-school child is briefly discussed as an introduction to an in depth discussion of the sexual development of children from infancy up to pre-school age. A continuum of sexual behaviours for pre-school children is discussed as well as theoretical models to interpret sexual behaviours and the subsequent consequences.

Chapter 3 focuses on the home environment of the pre-school child in order to address the diverse conditions that bring about normal and healthy sexual development or problematic sexual behaviours in pre-school children.

In Chapter 4 the handling of sex education at school and at home is investigated and preventative measures to be implemented at pre-school level are discussed. Guidelines for the formulation of a parent orientated sex education programme are emphasized.

The empirical data is presented in Chapter 5. It includes an introduction and analysis of the collected data.

The conclusions and recommendations based on the literature study and the results of the empirical study are presented in Chapter 6.

CHAPTER 2

Sexual development of the pre-school child

2.1 INTRODUCTION

Schutte (2000:11) maintains that pre-school children are able to master the concepts of personal safety programmes and sex education, and that they are able to internalise the knowledge. However, to present guidelines for the composition of a parent orientated sex education programme for pre-school children, it is important to understand the nature and extent of their physical, emotional and sexual development.

In this chapter the researcher describes the general physical and emotional development of the pre-school child as well as investigating and discussing the sexual development of children from infancy up to pre-school age. The researcher investigates a continuum of sexual behaviours of pre-school children, the development thereof, the characteristics of the child who reveals these behaviours, as well as the victim of molesting sexual behaviours. Finally, the researcher discusses the sexual behaviour of pre-school children based on different theoretical models, as well as the consequences of being sexually molested.

2.2 DEVELOPMENTAL THEORY OF CHILD DEVELOPMENT

To fully comprehend the sexual development and sexual behaviour of the pre-school child, it is important to have an understanding of the social and emotional development of the pre-school child. Among the many who have studied the aspects of child development, the contribution of Erick Erikson (1965) remains relevant and will be applied to explain the social and emotional development of the pre-school child.

Hoare (1993:18) maintains that Erikson, a trained psychoanalyst, was particularly interested in and influenced by anthropology, therefore his major contribution has been to give developmental theory a social and cultural dimension. He elaborated a phase or stage theory, covering the whole lifespan of humans, from birth to death. Each phase or stage had a development task to complete, and the failure or success polarised as two extremes or opposites. Erikson believed that the unsuccessful remains of earlier phases had a continued impact on later adjustments and on the favourable resolution of subsequent phases (Hoare, 1993:18; Mussen, Conger, Kagan and Huston, 1984:506-513). This separation of development into different stages is artificial and in reality the process is uninterrupted, which means that the transition from one stage to another is not abrupt, but takes place over a period of time (Barker, 1995:3).

There are five important stages of the theory as applied to childhood (Hoare, 1993:18).

2.2.1 Trust versus mistrust (ages 0-1)

This stage occupies the first year and is mainly concerned with the establishment of secure and stable relationships, primarily between mother and child, and also the establishment of social relationships. The successful outcome, which is the establishment of basic trust, implies that the child believes that his world is predictable, safe, trustworthy and secure. The child believes he is able to exert an influence over the outcome of events. An unsatisfactory first stage will lead to a basic sense of mistrust as opposed to trust, and is likely to cause major problems with personal relationships in later life (Hoare, 1993:18; Mussen et al, 1984:506-513). Barker (1995:3) maintains that the successful outcome of this stage is the basis for developing the capacity for intimacy.

During this stage, the child can also distinguish between familiar and unfamiliar people and shows signs of anxiety in the presence of strangers. Bonding between the child and the familiar caretakers develop. Features of attachment behaviour are normally evident and may include crying, calling and separation anxiety.

The child develops rapid motor functioning and by the time he is one year old, he is able to walk. Rapid intellectual development also takes place during the first year. Piaget (1929) refers to this as the sensorimotor period. Children learn that objects exist separate from themselves, and continue to exist when they cannot be seen any longer. They learn cause-and-effect relationships and start to comprehend spatial relationships (Barker, 1995:3).

2.2.2 Autonomy versus shame, doubt (ages 2-3)

This stage is characterised by the child's increasing powers of mobility and locomotor skills, providing the basis for the development of independence and autonomy (Hoare, 1993:18). The child develops rapid motor skills which enables him to walk, climb and to manipulate objects. The new skills are initially very vulnerable and only precariously developed, and the child's self-confidence is easily undermined, which results in a feeling of shame and doubt (Hoare, 1993:18; Mussen et al, 1984:506-513). The child develops a sense of being in control of himself, as opposed to being in doubt (Hoare, 1993:18). The role of the parents is to foster a sense of achievement rather than failure. The child also develops further social skills and learns what is permissible or not. The child often resists the caretakers' behavioural restrictions, and expresses this desire through temper tantrums. The continuation of attachment behaviour is evident, and the child learns to function as a member of a family, as well as outside the family at a day care centre or a nursery school. The child starts with his toilet training and also learns a limited verbal vocabulary.

The child's cognitive functioning develops rapidly and in the second year the child is able to represent one object by another, using language symbols and drawings for this purpose. The child is still the centre of attraction and remains dependent on his parents (Barker, 1995:4).

This stage represents the beginning of independence and the acquiring of skills. The successful completion of this stage results in a feeling of being capable and

competent. Unresolved residues of this stage will lead to a negative outcome and feelings of dependence and insecurity.

2.2.3 Initiative versus guilt (ages 3-5)

Barker (1995:4) refers to this stage as a period of great change. The child's rapidly expanding skills, especially in language, enable the child to initiate and endure activities, which results in further exploration (Hoare, 1993:18; Mussen et al, 1984:506-513). The child's sense of initiative enables him to participate in many activities. A lack of initiative will cause him to feel frightened and guilty. The child develops a life enriched with fantasies, for instance, imaginary friends and the use of transitional objects, such as a blanket or teddy bear, to which the child develops a special attachment (Hoare, 1993:22).

The child learns more socialisation skills, which he requires to function as a member of a group. The child strongly identifies with the parents, which results in the development of motivation to perform certain tasks. This is also the beginning of conscience formation, which is related to the process of identification with the parents.

The child develops a sexual identity. Psychoanalysts refer to this stage as the genital stage, because of the importance of the sexual development during this stage. The child further develops his intellectual functions and cognitive skills as well as an increased use and comprehension of language. The child also develops mental defence mechanisms and patterns of behaviour towards the family and outside

world. Mental defence mechanisms imply ways in which the child learns to cope with excessive anxiety.

Successfully completing this stage, results in a feeling of being confident about the skills the child has acquired, while the unresolved residues of this stage results in emotions of uncertainty and hesitance.

2.2.4 Industry versus inferiority (ages 6-10)

This period is dominated by schooling and peer relationships enabling the successful child to become literate and socially integrated with his peers (Hoare, 1993:20; Mussen et al, 1984:506-513). The normal developing child derives joy from personal satisfaction, recognition and opportunities to relate to other people. There is a continued development of defence mechanisms and children start to motivate their actions and beliefs. Failure to achieve these goals, lead to a sense of inferiority and inadequacy (Hoare, 1993:20).

2.2.5 Identity versus identity diffusion (ages 11-17)

The major focus of this stage is sexual identity and career identity (Hoare, 1993:6). This is also the onset of menstruation in girls and of seminal emissions in boys. Independence from the family and developing an own value system are important tasks. The successful accomplishment of these tasks provides the child with a strong sense of identity and self-confidence which enables the adolescent to make the transition to adulthood (Hoare, 1993:6; Mussen et al, 1984:506-513). There are four

principal developmental tasks to be completed: changing from being nurtured and cared for to being able to nurture and care for others, training for a career and acquiring skills to become self-supporting; becoming proficient in adult sexual roles and coping with heterosexual relationships; moving out of the home to form a new family by procreation (Barker, 1995:6; Mussen et al, 1984:506-513).

There is also a firm sense of achieving one's identity. Identity formation is completed during this stage. The children also acquire a more flexible cognitive style, such as the ability to accept assumptions, formulate hypotheses and to set propositions to the test. Erikson places the emphasis on the active interaction between the child and the environment in shaping the final outcome. Hoare (1995:20) maintains that Erikson's ideas on the life cycle theory of development, have many similarities compared to the contemporary ideas of modelling and cognitive theories as developed by cognitive and behavioural theories.

Poor relationships and uncertain career choices are important features of an insufficient adjustment, resulting in an aimless lack of direction (Hoare, 1993:20).

2.3 THE PHYSICAL DEVELOPMENT OF THE PRE-SCHOOL CHILD

Pre-school children can be enchanting to observe or an overwhelming problem to manage. Their transformations during this period may promote parental delight and pride, as well as frustration and concern. The accomplishments of pre-school children are noteworthy. They leap from restricted action-bound sensorimotor understanding of the world to more complicated levels of knowledge, based on the

use of symbols and the elaboration of fantasy. The toddler who has recently learnt to construct short sentences, becomes articulate and a verbal manipulator who has mastered all the rules of the language before starting school. The pre-school child transforms into a youngster who is ready to enter the world of peers with a personal code of moral values and a sense of himself as an individual, without a separation struggle. Pre-school children develop a great sense of autonomy and become aware of the perceptions of others. They develop complex skills and competencies and are influenced by the values of their families. The pre-school child shows multiple patterns of adaptation and develops resolutions for developmental tasks (Hoare, 1993:30; Levin, Carey and Crocker, 1992:39-42; Mussen et al, 1984:181-200).

2.3.1 Physical growth and neuromotor maturation of the pre-school child

Growth in size and physical capability provide an important biological substrate for developmental changes of the pre-school child. The average child gains two kilograms per year and grows six to eight centimetres per year, attaining half his adult height. The average pre-schooler loses a great deal of “baby fat” and develops a leaner body due to an increase in their activity level. By the age of three, most children can stand on one foot, hop on one foot, throw a ball overhand, walk upstairs with an alternating pattern, pedal a tricycle, copy a circle and draw a person consisting of two to four parts.

The fine motor abilities are progressively refined and it contributes to the emerging independence of the pre-school child. The development of motor competence is less sensitive to environmental factors as compared to other areas of development,

qualitative differences are significant and the degree to which relative deficits are perceived as abnormal, is more frequently determined by familial and cultural values than by biological course (Levin, Carey and Crocker, 1992:39-42; Mussen et al, 1984:181-200).

2.3.2 Symbolic functioning of the pre-school child

As children mature, they periodically graduate to levels of competence. The emergence of linguistic abilities provide a mechanism for describing events, asking questions, articulating desires and sharing feelings. By the age of two, children have a vocabulary of several dozen words which they can construct into sentences. By the age of three, children can speak consistently in short sentences, although grammatical mistakes may occur. At four, the child has mastered most of the grammatical rules, but speak in simple sentences. During the next year, their expressive language becomes more complex and they combine two or more ideas in one sentence.

2.3.3 Language and thought of the pre-school child

Pre-operational children live in a world of magic. They believe cartoon characters are real and some children may have imaginary friends. Their thinking is prelogical. They confuse coincidence with causation and can only focus on one aspect of a feature at a time. Learning to distinguish between fantasy and reality, is one of the main cognitive tasks of the pre-school child. Achievement of these goals are accompanied by a gradual shift from egocentrism to an ability to understand things from the

perspective of others. With the achievement of these milestones, the pre-school child is ready to move to logical thinking (Levin, Carey and Crocker, 1992:39-42; Mussen et al, 1984:181-200).

2.3.4 Development of play in the pre-school child

The major achievement of the pre-school child is the ability to use symbols. These may take the form of words or mental images and are dramatically demonstrated in the rich fantasy that characterizes much of their play. They use dramatic play in order to facilitate the processes of early sexual and adult role identification. The acquisition of new skills is facilitated by the opportunities provided in the context of play. Another phenomenon in the development of play is the evolution from solitary and parallel to interactive and co-operative play (Levin, Carey and Crocker, 1992:39-42).

2.3.5 Expanding social values during pre-school years

During the pre-school years, children develop a sense of being an individual in a social system, with conventional guidelines related to such issues as sex roles and moral values regarding the difference between right and wrong. The pre-school child identifies with the parent of the same sex and adopts a strict code of moral values. These moral values are reinforced by positive and negative support from the parents. The fantasy play of pre-school children represents themes of sex roles and adult values (Levin, Carey and Crocker, 1992:39-42; Mussen et al, 1984:181-200)

The above mentioned physical and behavioural development of normal pre-school children presents a useful framework within which the sexual variations and differences of pre-school children can be examined and understood.

2.4 SEXUAL DEVELOPMENT OF THE PRE-SCHOOL CHILD

Researchers who have studied the sexual behaviour of children have agreed on the normal and appropriate sexual behaviour of pre-school children (Gil and Johnson, 1993:42; Wardle, 1995:5). Their psychosexual development start in infancy (Friedrich, Grambsch, Broughton, Kuiper and Beilke, 1991:456). Their sexual curiosity, interest and experimentation are progressive and sexual development is affected by different variables. The sexual development of pre-school children is influenced by the cultural norms and expectations of the family, the values and interactions of the family, as well as the interpersonal experiences encountered (Gil and Johnson, 1993; Erooga and Masson, 1999; Wardle, 1995). The researcher has counselled children from different cultures and has observed how each culture has different norms, for example, sexual behaviour amongst pre-school white children provoke emotions of anxiety amongst their parents, while more advanced sexual behaviour is seen as acceptable amongst coloured and black people. In contradiction to this, coloured and black parents do not discuss sex freely with their children while white people are more in favour of sexual discussions with their children. In each family the expectations are different and the children live up to these expectations. The researcher had boys in treatment who were encouraged by their patriarchal fathers to sexually victimise girls in their peer group because the fathers believed that women are sex objects who want sexual attention in spite of their resistance. These

parents could not understand why their children were in treatment but would admit that they showed far more advanced and aggressive sexual behaviour towards their female peers when they were young. The researcher has also observed many sexually abused children re-enacting their sexual encounters on their peers, and agrees that the sexual encounters that pre-school children experience, have a direct effect on their sexual behaviours.

To fully understand the sexual behaviour of pre-school children it is important to understand the sexual development prior to the pre-school years.

2.5 SEXUAL DEVELOPMENT OF THE NEW-BORN TO FOUR YEAR OLD CHILD

Freud (1953) was the first psychiatrist to study infantile sexuality and hypothesised that sexual impulses are crucial to the development of the personality (Freud, 1953; Tyson, 1989). According to the psychosexual theory of Freud, children ranging from one and a half to three years are in the anal stage of development during which they focus on bowel and bladder control. Children between the ages of three and four and a half are in the phallic stage of development and are increasingly aware of genitals, male-female differences and sex-roles (Freud, 1953; Gil and Johnson, 1993). He also claimed that a sense of masculinity is primary for both sexes. For a girl to accrue a sense of femininity she has to give up her masculinity, accept her incomplete and inferior state and turn her affection away from her mother towards her father (Freud, 1953; Gil and Johnson, 1993; Honing, 1998; Tyson, 1989). Honing (1998) writes that pre-schoolers develop from this Oedipal period towards acceptance of their desire to rival the same-sex parent. Children who favour the parent of the same sex, aspire to

grow up to be like that parent, as compared to being a competitor. The Oedipal theory remains without substantial empirical backing and some researchers describe it as being outdated and narrow (Gil and Johnson, 1993; Tub, 1995; Tyson, 1989). According to Johnson in Gil and Johnson (1993:12-13), it is more likely that children feel jealous of the special relationship between parents and their exclusion from it, which result in children seeking special attention from their parents. Tyson (1989) criticises Freud's theories as being inaccurate because of the overemphasis on sexuality and of the neglect of the roles of object relations, ego and superego functioning, aggression, conflict and character formation. Sexuality should be seen in the broader perspective of gender identity, developmental achievements that combine sexuality with object relations, ego and superego functioning, and a sense of self (Tub 1995; Tyson 1989).

Tub (1995) made a study of sexual development according to Freud and Adler. In contrast to Freud's emphasis on infantile sexuality as the supreme motivating factor in personality development, Adler emphasised the sexual development of the child under the concept of the child's life style. The child's life style during the first six years will influence the unconscious goal of significance, mastery, adequacy, security and comfort. The child's experiences, the subjective interpretation of these experiences, as well as the goals established during the first six years to compensate for emotions of inadequacy, are the foundation of the self-created lifestyle (Tub, 1995).

Langford in Lu (1994:6) has studied infantile sexuality and noted that children show a natural sexual interest from infancy, and sexual curiosity is an instinctive impulse such as eating or sleeping. Her study revealed that male infants have penile

erections, while females show vaginal lubrication and clitoral erections soon after they are born. Friedrich et al (1991:456) report on a variety of sexual behaviours in babies, including male infants experiencing erections and “orgasmic-like responses” from as young as 5 months. According to Gil in Gil and Johnson (1993), children from birth to age four share similar experiences. They usually do not attend school and their discovery is exploratory and stimulation of the genitals is at random and sporadic (Friedrich et al, 1991:456; Gil and Johnson, 1993). They have little inhibition and exploration is of a physical nature (Gil and Johnson, 1993; Honing, 1998; Wardle, 1995:15). Children in this age group discover that when certain parts of the body are stimulated, pleasant sensations occur (Gil and Johnson, 1993; Honing, 1998). Genital interest increases between the age of two and five but male children show significantly more masturbatory activity compared to girls (Friedrich et al, 1991:456). If the parents provide a positive reinforcement, they may seek to repeat the experience, while negative reinforcement in the form of physical punishment, will give the child an association between self-exploration and pain.

According to Johnson in Gil and Johnson (1993:4-10) infants respond to kissing, rubbing and caressing by their caretakers. They get a sensual experience from withholding urine and faeces. Young children explore each other's bodies visually and tactilely. This participation in discovering their similarities and differences, is with mutual consent. There is an element of excitement and children feel silly and have fun. There is no feeling of shame, fear or anxiety, which is common in inappropriate sexual play.

Research from Friedrich et al (1991:456) indicates that children usually start to masturbate at the age of three. When children masturbate, they rhythmically manipulate their genitals with their hands. The three-year-old child also enjoys playing house and imitating situations in which they kiss, lie in bed together, make a baby and have arguments. Children with little knowledge of sex may lie the doll parents in the same bed and say they are making a baby. Children with more knowledge of sex will undress the dolls, put the male on top of the female and rub them together. At the same time, children start to play “doctor, doctor” which will reflect what the child has experienced and will not go beyond that experience. For example, a child who has had a vaginal infection will put cream on the “patient’s” vagina. Three-year-old children may insert an object into any of their genitals to explore their bodies. This should be a singular event. By the age of four, children engage in exhibitionistic and voyeuristic behaviour with adults and other children, as well as often initiating games which involve undressing and sexual exploration (Friedrich et al, 1991; Gil and Johnson, 1993).

2.6 SEXUAL DEVELOPMENT OF THE FOUR TO SIX YEAR OLD CHILD

Four to six year old children are in a developmental stage in which they are outrageously flirtatious and seductive. They impersonate mannerisms of parents and television actors (Friedrich et al, 1991). Pre-school children, or five or six year old children, have increased contact with their peers and start to socialise with less bodily contact (Gil and Johnson, 1993). Exploration moves away from a physical nature and becomes more visual (Wardle, 1995:15). They have more contact with children of both genders and are exposed to new sexual behaviours such as

masturbating in more creative ways (Finkelhor, 1979; Gil and Johnson, 1993; Lindblad, 1995; Leifer, Shapiro, Martone, Kassem, 1991; Wardle, 1995 and Wyatt and Powell 1988; 1986). The researcher has been informed by parents that their daughters enjoy sitting on or pressing up against something that vibrates such as a washing machine or the tumble drier, they enjoy spraying their vaginas with a strong jet of water while bathing or swimming, or they sit on a sprinkler while water gushes into their vaginas.

Masturbation can also involve the rhythmical thrusting of the genitals by rubbing it on something, by using their hands, stuffed animals, blankets or furniture. It provides sensual pleasure and distraction, and is a way of reducing tension. An orgasm is possible, but young children are not consciously orientated toward this goal. Sexual play amongst four to six year old children involve exploring or touching other children's genitals, self-exploration, kissing, hugging, peeking at and the exposing of genitals. Sexual rehearsal play, which includes coital motions and simulating sex, is also common (Gil and Johnson, 1993:42; Wardle, 1995). Both sexes share their exploration and information with peers of the same sex. Children at this age question where they come from, they want to see pictures of the human body and giggle when they see people kissing. In public, affectionate behaviour between different sexes repulse them; in private they are fascinated by similar scenes. Six year old children seek more privacy and unexpectedly demand it. They progress to a period of less sexual behaviours. Because the children are subjected to non-familial socialisation experiences at school, they are likely to assume cultural morals and norms for sexual behaviour despite their home values (Friedrich et al, 1991; Gil and Johnson, 1993).

2.7 NORMAL SEXUAL BEHAVIOURS OF PRE-SCHOOL CHILDREN

Studies (Friedrich et al, 1991; Gil and Johnson, 1993; Johnson 1995; Schoentjes, Deboutte and Friedrich, 1999; Wardle, 1995) have revealed behaviours which are considered developmentally expected when they occur infrequently. The categorisation of sexual behaviours is influenced by frequency, urgency or compulsiveness, the extent to which the behaviour can be modified, and the extent to which the behaviour is accompanied by aggression and coercion. Normal sexual behaviour of pre-school children should be infrequent, not compulsive and without aggression or coercion. Lu (1994:6) refers to children's sexual behaviour as sensate-erotic pleasuring.

Pre-school children masturbate infrequently and in solitude. This occurs when they are tense, excited and afraid or when they are going to bed. They enjoy being in the nude and explore the differences between males and females through playing sexual games such as "doctor, doctor". They take advantage of looking at nude people and ask questions about genitals, breasts, babies and intercourse. Pre-school children are interested in watching people using the toilet and show an interest in their own faeces. They start to use "dirty" words for using the toilet and sexual functions. They occasionally inspect the bodies of their friends and play "house" which involves having babies as well as acting out the roles of mommy and daddy. Out of curiosity or exploration they might insert objects in their own genitals or rectum, however, a repetition on this behaviour is not normal. It has also been noticed that male pre-school children occasionally experience erections (Gil and Johnson, 1993).

The context in which sexual behaviours occur is important. Firstly, it is important to explore the duration of the sexual behaviour to know whether the sexual behaviour was normal or problematic for the age of the child. Secondly, the frequency of the sexual behaviour should be taken into account to define whether the behaviour was normal or problematic. Thirdly, it is important to establish whether coercion, aggression, bribes, secrecy, manipulation, force or pain accompanied the sexual behaviour. Fourthly, the response of the other child, whether consent was given or not, is important. Fifthly, when the age discrepancy between children involved in sexual play is greater than three years, it warrants investigation, because it could indicate that there is a cognitive and emotional disparity between the children. Older children can abuse the innocence of younger children when they initiate sexual exploration with pre-school children. Finally, the home environment should be taken into account. If the children are exposed to explicit sexual activities or visuals, it is normal for them to re-enact what they have observed on friends. When a child, who has not seen such behaviour, re-enacts it on their peers, it could indicate possible molestation. It is therefore important to understand under which circumstances sexual behaviour takes place (Gil and Johnson, 1993; Johnson, 1995; Wardle, 1995).

According to Friedrich et al (1991) and Schoentjes et al (1999) there is a decline in overt sexual behaviours from the age of six. Sexual curiosity tends to increase with age, which means more frequent questioning and observing, compared to physical exploration takes place.

2.8 PROBLEMATIC SEXUAL BEHAVIOURS OF PRE-SCHOOL CHILDREN

Normal sexual behaviour can become problematic if it is characterised by the following factors: when a child's normal sexual behaviour becomes repetitive despite attempts to restrain the behaviour; when the child becomes pre-occupied with that particular type of sexual behaviour; when one type of sexual behaviour stops but is replaced by another type of sexual behaviour; when the child becomes so preoccupied with sexual behaviours that it interferes with other activities; or when the child repeatedly tries to engage other children into the sexual behaviours. Normal sexual behaviours can also be problematic when it occurs with developmentally inappropriate aggression. Developmentally inappropriate aggression is defined as aggression that manifests some type of coercion, threat, intimidation or control (Friedrich, 1991; Schoentjes et al, 1999; Gil and Johnson, 1993).

Problematic sexual behaviours are intrusive, aggressive and more imitative of adult sexual behaviours (Schoentjes et al, 1999). Authors (Friedrich et al, 1991; Gil and Johnson, 1993; Johnson, 1995; Schoentjes et al, 1999 and Wardle, 1995) agree that the following sexual behaviours are problematic and by their single occurrence, raise significant concern: masturbating in public or private and which interferes with the child's normal childhood activities; playing male or female roles in a sad, aggressive or angry manner; touching adults on their private parts or allowing adults or other peers to touch their private parts; requesting people to undress or forcibly undressing others to observe them in the nude; asking strangers about genitals, breasts, intercourse and babies after the parent has answered these same questions; repeatedly using sexual words in public or repeatedly playing with faeces after being

reprimanded; forcing children to play sexual games while removing their clothes; putting an object into their genitals or rectum or that of other children after being reprimanded; simulating sexual intercourse in the nude; having sexual intercourse or attempting to have sexual intercourse; putting their tongue in a partner's mouth when kissing and touching the genitals of animals to sexually arouse them.

Various types of sexual behaviours raise concern because it could indicate the development of problematic sexual behaviour. American authors (Friedrich, 1991; Gil and Johnson, 1993; Johnson, 1995; Wardle, 1995) have agreed that the following sexual behaviours should be investigated: continuous touching of genitals after being told to stop; continuous questioning about genital differences after these questions have been answered; simulating sexual intercourse while fully dressed; continuous erections; smearing faeces on wall or floor; inserting objects into genitals or rectum or when the sexual knowledge of the child is far too advanced for the age or the degree of sex education that has been given to the child (Gil and Johnson, 1993; Johnson, 1995; Wardle, 1995). However, when these sexual behaviours are stopped on request, these behaviours are not considered to be problematic. When these sexual behaviours are compulsive and occur with aggression, they are classified as problematic sexual behaviours. Wardle (1995:16) writes that researchers could not unanimously agree on the categorisation of these sexual behaviours. Some researchers found these sexual behaviours problematic while others felt that it depended on the situation.

Frank Lindblad (1995) has researched the sexual behaviour of 251 Swedish pre-school children in day-care centres using questionnaires given to the staff and

parents. The questions were taken from the Richman and McGuire's Pre-school Behaviour Checklist (1986). The result of the study correlates with previous research (Fiedrich, 1991; Gil and Johnson, 1993; Johnson, 1995 and Wardle, 1995) regarding normal and problematic sexual behaviour of pre-school children. One percent of the pre-school children in the survey showed the following sexual behaviours which indicated that the sexual behaviours are unusual for a pre-school child: touching an adult's genitals; child requesting adult to touch child's genitals; using objects to rub against own or other child's genitals and masturbating obsessively, without pleasure and a painful way. Two percent of the children showed the following sexual behaviours, indicating that these sexual behaviours are also not normal for a pre-school child to exhibit: often or daily showing their genitals to adults; daily or often playing sexual explorative games; simulating adult sexual activities; using sexual words and attempting to touch women's breasts.

Research by Schoentjes et al (1999) regarding the sexual behaviour of Belgian pre-school children concluded that the following sexual behaviours are normal for pre-school children in Belgium: touching their own genitals; showing their genitals to others; trying to look at nude adults and touching the breasts of adults.

The researcher counselled numerous pre-school children with sexual behaviours which offended their peers and raised concern amongst parents and teachers. The majority of the teachers felt that these sexual behaviours were not normal and they did not want it to occur in their schools. These sexual behaviours were: oral sex between peers; mutual masturbation; excessive masturbation; simulating sex between peers; attempted sexual intercourse; putting objects in genitals or rectum of

self or other children and peers forcing friends to play sexual games and hurting their genitals.

2.9 A CONTINUUM OF SEXUAL BEHAVIOURS OF PRE-SCHOOL CHILDREN

Friedrich et al (1991), Schoentjes et al (1999) and Gil and Johnson (1993) report on extensive evaluations that have been done on the sexual behaviours of pre-school children. A parent report measure, the Child Sexual Behaviour Index, was used in all of these studies. To make the study representative of the population, Schoentjes et al (1999) included the pre-school children of public and private pre-schools, while Friedrich et al (1991) used a representative sample by recruiting the population in paediatric clinics, family medicine clinics and day-care centres. Johnson (1993) divided these sexual behaviours on a continuum of sexual behaviours ranging from normal sexual exploration, sexually reactive behaviour, mutual involvement of the full range of adult sexual behaviours, and children who molest other children.

2.9.1 Normal sexual exploration

It is normal for children who are in the same developmental stage to explore each other's bodies visually and tactilely. They are generally children of both genders, and more often friends than siblings. Participation in sexual games is voluntary, playful and of mutual interest. The children feel silly and sometimes confused, but they do not experience emotions of deep shame, fear or anxiety. The sexual exploration is not coercive and is without intrusion of the body. The sexual behaviours range from auto stimulation, self-exploration, kissing, hugging, peeking, touching, occasionally

exposing genitals to other children and perhaps simulating intercourse with dolls. When instructed to stop, these sexual behaviours cease (Friedrich, 1991; Gil and Johnson, 1993; Johnson, 1999; Kairys, Alexander, Block, Everett, Hymel and Johnson, 1999; Wyatt and Powell, 1988). Finkelhor (1976) has noted that not all children engage in sexual behaviours.

2.9.2 Sexually reactive exploration

Children in this group display more sexual behaviours than their peers and their focus on sexuality is disproportionate in relation to their peers (Gil and Johnson, 1993). The reason for these sexual behaviours is the result of either sexual abuse and exposure to pornography or sexual stimulation through a sexually explicit home environment. According to research (Finkelhor, 1979; Gil and Johnson, 1993; Jelu, 1990; Wyatt and Powell, 1988), children who are reared in a commune, crowded quarters, on the street, in a holistic life-style or are from sexually permissive cultures, are more likely to show more sexual behaviours compared to a conventional inhibited family. This is because the parents lack privacy and the children are exposed to the sexual behaviour of adults or older peers. Johnson (1993) reports that children who have been sexually over stimulated fail to understand these experiences. This results in children acting out their confusion in the form of more advanced or frequent sexual behaviours and they show an increased interest beyond the norm for their age. Sexual behaviours from sexually reactive children include: excessive masturbation, exposing themselves or inserting objects in their genitals. These children may include other children from their peer group in these sexual behaviours, but without using force, coercion, victimisation or bribes. With this sexualised behaviour they strive to

understand their confusion around sexuality (Gil and Johnson, 1993). Yates in Gil and Johnson (1993) describes these children as sexually compulsive. When these children are told to stop the behaviour, they generally acknowledge the need to stop and welcome intervention. The sexual behaviour ceases readily because the situation does not represent a long pattern of secrets, manipulation or highly charged sexual behaviours (Gil and Johnson, 1993).

Many of the researcher's clients are children with sexually reactive behaviours as a result of their sexualised home environment. In these homes children are exposed to inappropriate explicit sexual information through direct or indirect experience. This implies that some children witness their parents having sexual intercourse, or watch sexual activities on television or pornographic videos. These families lack parental guidance and supervision and have limited or no boundaries for nudity. These children develop a heightened sense of sexual arousal and force their peers into inappropriate sexual play, for example, excessive mutual masturbation.

2.9.3 Extensive mutual sexual behaviours

Johnson (1993) and Wardle (1995) agree that the children in this group participate in the full spectrum of adult sexual behaviours. These sexual activities include oral copulation and vaginal and anal intercourse. The participants are all in the same age range and conspire to keep their sexual activities a secret. The children do not use force or physical or emotional coercion to persuade their partners to participate. The emphasis of this group falls on mutual consent to participate in adult sexual behaviours. Children in this group do not share the spontaneity of the first group, or

the shame and anxiety of the second group, or the anger and aggression, which is typical of children who molest other children. Instead they display a blasé attitude towards their sexual behaviours with other children. Some of these children, with extensive mutual sexual behaviours, have been emotionally and physically abused by their caretakers. Others have been sexually abused and they continue and increase their sexual behaviours with other children. Children also engage in sexual behaviours with their siblings as a way of coping in a highly dysfunctional family. All children from this group have lived in extremely disordered and sexualised home environments. These children use sex as a way to make friends because they mistrust adults who constantly harm and abandon them. Their sexual activities are attempts to secure human connections in a world that they have experienced as being chaotic, risky and hostile towards them (Gil and Johnson, 1993).

The researcher agrees with Johnson (1993) that neglected children from dysfunctional families often use sexual activities in an attempt to experience human nurturing and intimacy by having sex with a sibling or by using sex as a way to try to relate to their peers.

2.9.4 Children who molest other children

Wyatt and Powell (1988:265-268) refer to children who molest other children as having a Sexually Abused Child's Disorder while Gil and Johnson (1993) refer to these children as children who molest other children. Children in this category display the following sexual behaviours: oral copulation; vaginal intercourse; anal intercourse and forcible penetration of the vagina or anus with fingers, sticks or other objects.

These behaviours are consistent and increase with time. Even when their sexual activities are disclosed, they fail to stop without intensive and specialised treatment. Children in this group do not share a light-hearted, mutual curiosity in sex, but instead show sexual behaviours that are impulsive, compulsive, and aggressive. The sexual acting out of feelings are related to their emotions of anger, rage, loneliness and fear. Children who molest choose children who can be bribed, forced and coerced into the sexual activities. The victims are selected because of their vulnerabilities, which include their age, intellectual impairment, loneliness, depression, social detachment or emotional deprivation. Their young victims are not capable of giving their consent. Children who molest have many behaviour problems at home and at school, they have limited other interests and very few friends. They are physically and sexually aggressive as a result of the sexual and emotional abuse, as well as the severe and unpredictable punishment they have endured at home. Their home environment is marked by sexual stimulation, lack of sexual boundaries and physical violence (Erooga and Masson, 1999; Gil and Johnson, 1993; Wardle, 1995). Experts (Finkelhor, 1979; Gil and Johnson, 1993; Johnson, 1985; Shapiro, 1991) agree that children who molest other children, coerce, bribe and trick them into a range of sexual behaviours. Shapiro (1991:60) has noted that the coercion involves the use of material rewards, manipulation or attention from a lonely friend.

The researcher counselled many children who molest children younger than themselves or children in their peer group. These children seldom deny their molesting behaviours but are inclined to justify their behaviour. A client molested his stepsister and justified his behaviour because he gave her protection and comfort while her father was intoxicated. She was afraid at night and climbed into his bed, but

in return he demanded sex from her. Another four-year-old child was molested by an older child who emotionally threatened his victim by claiming that he would not play with her again, if she should reveal their secret. This threat motivated the child-victim who already felt lonely, isolated and abandoned at school, to keep quiet.

2.10 DEVELOPMENT OF SEXUALLY ABUSIVE BEHAVIOUR

Sexual abuse occurs when a child is engaged in sexual activities, which the child cannot comprehend and for which the child is developmentally unprepared and therefore cannot give consent. These sexual activities include all forms of oral-genital, genital or/and anal contact by or to the child. It also includes non-touching abuses such as exhibitionism, voyeurism or using the child in the production of pornography. These sexual activities are against South African laws (Child Care Act 74 of 1983 and as amended 1996; Domestic Violence Bill no 75 of 1998; Sexual Offenders Act no 23 of 1957 and the Constitution of the Republic of South Africa Bill, Act 108 of 1996) as well as being social taboos of society (Adams 1995; Barnes-September, Mayne and Brown-Adam, 1999; Lewis, 1999; Kairys, Alexander, Block, Everett, Hymel and Johnson, 1999). Sexual misuse implies sexual stimulation that is inappropriate but not necessarily abusive for the age and level of development of the child (Adams, 1995:169).

Erooga and Masson (1999:2) reveal that a significant proportion of adult sex offenders reported that the onset of their sexual arousal to children occurred during childhood or adolescence. Research (Erooga and Masson, 1999; Finkelhor and Brown, 1986; Gil and Johnson, 1993; Gordon, Schroeder and Abrams, 1990; Jehu,

1990; Kelley, 1993; Lindblad, 1995; Wardle, 1995 and Wyatt and Powell, 1988) reveals that sexually abused children sexually abuse others as part of their response to their own sexual abuse. Problematic sexual behaviours towards other children and sexualised responses may be psychologically or physiologically rewarded. Intimate relationships, closeness and power may become sexualised. A powerless feeling due to the sexual abuse, can lead to a need to control or dominate events or people. This causes re-enactment of the abusive behaviour in order to remedy the emotions associated with their own experiences. Feeling betrayed due to the sexual abuse, the ability to form appropriate relationships may decrease and feelings of hostility and distrust increase. A desire for retaliation results in sexual abuse of peers. The stigmatisation resulting from the sexual abuse can further damage the self-esteem and increase a sense of isolation. This leads to further sexual abuse of peers (Erooga and Masson, 1999:2-3).

2.11 CHARACTERISTICS OF CHILDREN WHO MOLESTS

Experts (Erooga and Masson 1999; Gil and Johnson 1993 and Hoghughi 1997) have identified similarities between children who molest. These children show disturbed interpersonal relationships, which cause them to have negative peer and adult relations and they also have very few or no friends. Their relationships with peers are generally characterised by antagonism, fear, uncertainty and many disagreements. They have poor social skills and they show low tolerance to others. Their problem-solving and coping skills are almost non-existent and they are generally anxious and depressed. Laws (1989) goes further by noticing their boredom, emotional inhibition or over-controlled behaviour. Laws (1989) agrees with Shapiro (1991) that cognitive

distortions are also precursors to their sexual abusive behaviour. The researcher has noticed how these children use sexuality, secret games, or their knowledge of sex, to gain friends. The family of a child who molests is likely to be dysfunctional, with family disruptions and sexual and emotional victimisation. The symptoms of pain or helplessness manifest as deviant sexual behaviour. The teachers of the children who molest their peers express concern about their aggressive behaviour, anxiety, poor social skills, lack of problem solving skills and their inability to make friends.

Johnson (1993:69) has noticed that children who molest other children have an average to low IQ and they are frequently diagnosed with attention deficit disorder or hyperactivity. Many teachers of children that are diagnosed as children who molest their peers, informed the researcher that the children are attention seeking and disruptive in class, which are typical behaviours of children who suffer from attention deficit disorder or hyperactivity.

The motive for children to molest others is seldom to obtain sexual pleasure, but rather to express internalised anger or tension. The minority of children who molest do describe their inappropriate sexual behaviour as striving for pleasure (Johnson, 1995:3-4). Searching for sexual gratification is the result of increased hormonal levels after experiencing earlier sexual abuse. Children who molest experience heightened physiological arousal to different emotions. For example, they are extremely lonely, hopeless, jealous, angry, tense or anxious. These emotions of tension and anxiety result in physiological arousal. The environmental factors and feelings are paired so that children who recall a violent scene and who feel sad, feel aroused and seek to discharge the arousal immediately. The arousal is discharged against people in

physically, verbally or sexually aggressive ways. Once a physiological response has been established, it can be revoked when exposed to the same stimuli. Subsequently a physiological response pattern, relating to sexually aggressive behaviour patterns, develops (Gil and Johnson, 1993).

A study done by Gordon, Schroeder and Abrams (1990) compared the sexual knowledge of sexually abused children to non-abused children. The sexually abused and non-abused children were of similar age and social class. The result of the study showed that sexually abused children did not have more knowledge about sex compared to the non-abused children. Inappropriate sexual behaviour does not result in more sexual knowledge or more understanding of sexuality. Sexually abused children, who exhibit problematic sexual behaviour, are re-enacting that behaviour from their experience and do not have an increased understanding of sexuality. Children who have been exposed to adult sexual behaviour, for example, through watching adult movies, may exhibit demonstrations of problematic sexual behaviour. However, this does not lead to an increased understanding of sexuality. According to Johnson (Gil and Johnson, 1993:12), parents of sexualised children are generally apathetic to provide positive and healthy sex education to their children. These children have distorted values and perceptions about sexuality, often due to the influence of the media. Many studies (Erooga and Masson, 1999; Finkelhor, 1986; Gil and Johnson, 1993; Harper, 1991; Hoghughi, 1997; Kelley, 1990; Leifer, Shapiro, Martone and Kassem, 1991 and Wardle, 1995) reveal that children who molest have a high degree of sexual preoccupation. Erooga and Masson (1999:74) indicate the following pre-dispositions to sexual abuse of children: established, habitual patterns of sexually abusive behaviour; preoccupation with deviant sexual fantasies

(especially when they are reinforced by exposure to pornography) and beliefs and attitudes that maintain abusive behaviour.

Most children who molest have a long-standing dissatisfying relationship with their parents (Finkelhor, 1979, 1986; Gil and Johnson, 1993). Their relationships with other adults in the family are stressed and fraught with conflict. Most children who molest are victims of physical or sexual abuse or have witnessed physical or sexual abuse. Nurturance and emotional support are lacking in the parent-child relationship, which contribute to a lack of experience in forming positive attachments (Erooga and Masson, 1999; Gil and Johnson, 1993). Hoghughi (1997) describes their resistance and hostility toward figures of authority. Finkelhor (1979:23) states that these children are needy children who have discovered that they can achieve attention through sexual activities. The researcher has also noticed that children who molest other children have dissatisfying relationships with their parents. Treatment of these children often involves educating their parents on general parenting skills.

Erooga and Masson (1999) state that children under the age of eight use less coercion and more enticement to secure the compliance of their victims.

2.12 THE SEXUALLY DEFENCELESS CHILD

Children who are molested fail to take self-protecting actions. They allow a sexual situation to continue and do not take any action to stop the molestation. These children have few friends and are passive, which make them vulnerable (Finkelhor, 1979:23). Johnson (1993:49) writes that the defenceless child is easily coerced,

fooled and bribed into a sexual activity. Victims are intellectually impaired, very lonely, depressed, isolated and emotionally needy. Because of these vulnerabilities of the victim, the abuser uses social and emotional threats to gain compliance. Power plays a vital role in the relationship. The victim is often younger than the abuser, although some abusers will abuse children in their peer group or even older children. In sibling incest, the victim is more often the favourite child of the parents (Gil and Johnson, 1993). Hoghughi (1997:50) recognises that some children are particularly vulnerable to abuse because they exhibit sexualised and seductive behaviours. These children are vulnerable to further abuse due to their premature sexual behaviour. They are usually unaware of the distorted way in which the perpetrator interprets their behaviour.

The researcher has found that defenceless children do not protect themselves, because they have not been taught how to protect their bodies against sexual intrusion. They lack sexual boundaries and have not been taught the critical skills of assertiveness. They feel powerless against adults or intimidating peers, which make them vulnerable to sexual abuse. These children often come from a patriarchal family in which the children have no power and total obedience is expected; or they come from an over-protecting family, sheltering them from reality without giving them any responsibilities or independence; or they have a history of sexual abuse and are vulnerable to further abuse.

2.13 THEORETICAL MODELS ON SEXUALLY ABUSIVE BEHAVIOUR

Erooga and Masson (1999:11) note that during the early 1980s, theoretical models were developed to understand sexually abusive behaviour. This section will review those models and outline some of the key concepts that assist in understanding sexually abusive behaviour. They are the four-preconditions model; feminist approach; family systems perspective; dynamic perspective; psychological perspective; developmental theory and the learning theory.

2.13.1 The four-preconditions model

The most widespread model used to understand sexually abusive behaviour in adolescents is the four-preconditions model developed by David Finkelhor (Erooga and Masson, 1999:10). According to Erooga and Masson (1999), this model can be used to understand sexual abusive behaviour of young children. The model suggests four preconditions that must be met before sexual abuse occurs. Firstly, the child perpetrator must be motivated to abuse the victim. This motivation is usually an emotional need that the victim satisfies. Secondly, the perpetrator has to overcome internal inhibitions against acting on that specific motivation. The perpetrator has a cognitive distortion to believe that the victim has given consent or that the victim is responsible for the abuse. Thirdly, the perpetrator has to overcome external inhibitors. This means the perpetrator has to have access to an environment where the sexual abuse is possible. Finally, the perpetrator has to overcome or undermine the victim's possible resistance to the sexual abuse. This includes resistance to the abuse as well as analysing the personality traits of the particular victim (Erooga and Masson, 1999:10-12).

2.13.2 Feminist theory

The crux of the Feminist Theory is that society is male dominated and renders women and children as powerless. The media and pornographic programmes and literature portray women and children as desirable sexual victims. Boys grow up to see themselves as superior. Men with serious identity problems seek easy coercive sex with children and women (Hoghughi, 1997:20-34). The researcher often counsels pre-school children who molest their peers as a result of watching pornography. One five-year-old boy discovered pornographic magazines under his father's mattress. At school he manipulated his female friends into re-enacting these pornographic scenarios. Another boy watched pornographic videos and re-enacted the behaviour with his friends believing it to be normal child behaviour.

2.13.3 Family system perspective

The Family Systems Perspective assumes that the experiences of the family shape and sustain the sexually abusive behaviour (Finkelhor, 1979; Gil and Johnson, 1993; Hoghughi, 1997; Laws, 1989). Parenting is concerned with the care, control and development of children. Care concerns the child's physical, emotional and social survival. Control concerns setting and enforcing boundaries. Development is intended to ensure that the child's potential in all functional areas are nurtured. There are two types of families that contribute to sexual abusiveness. The first type of family is the chaotic family where parents are poorly educated and unstable (Finkelhor and Browne, 1986; Hoghughi, 1997; Gordon, Schroeder and Abrams, 1990). Parenting is

insufficient and without appropriate care, control, affection, attachments and support. Children are exposed to explicit sexual visuals and to witnessing sexual activities between parents (Hoghughi, 1997). The second type of family that contributes to sexual abuse is where family interactions are rigid. Parental expectations are too high, punishment is severe and poor communication and extremely harsh rules about sexuality exist (Finkelhor and Browne, 1986; Hoghughi, 1997). The researcher agrees that both of these families cause children to have inadequate and deviant attachment patterns, which make them vulnerable to sexual abuse. The perpetrator uses sex to gain power, closeness or intimate relationships. The victims are vulnerable to sexual abuse because they lack proper parenting and they are in need of care, love and acceptance.

2.13.4 The dynamic perspective

The Dynamic Perspective concerns the facts and consequences of sexual abuse. This perspective focuses on interpreting the facts of a child's development and relationships in order to understand his abusive behaviour. Early developmental experiences, in retrospect, provide a useful perspective on the perpetrator's abusive sexual behaviour (Hoghughi, 1997).

2.13.5 The functional analysis

The Functional Analysis is a psychological perspective, which is generally adopted by psychologists when analysing and explaining the interdependent elements of causation, triggering and maintenance of sexually abusive behaviour. This approach

identifies the antecedents, the behaviour itself and its consequences. The antecedents concern the background, personality, predisposition, context, facilitation and triggers. Predisposition concerns poor inhibition against breaking a rule. The context concerns what the children were doing, for example, watching erotic material. Facilitation concerns the supervision. A typical trigger factor could be that someone invites the perpetrator to play a sexual game. The behaviour is influenced by the time, location and the vulnerability of the victim. Consequences concern the physical material and social and psychological gains and losses of the perpetrator's behaviour (Hoghughi, 1997). The researcher had a client who came from a dysfunctional home. His mother remarried an alcoholic husband who was addicted to pornography. The client was continuously in trouble due to his poor inhibition against the breaking of rules. This was his way of getting attention from his newly wedded mother. His stepsister would visit the family on weekends. His stepfather would become intoxicated while openly watching pornography. His stepsister would flee from her drunken father and climb into the bed of the client who had just been exposed to pornography. He would then sexually abuse her. This case study is best understood by adopting the functional analysis approach in analysing and explaining the reason and continuation of the sexually abusive behaviour.

2.13.6 The diathesis-stressor paradigm

The diathesis-stressor paradigm assumes that abnormal behaviour is the result of personal factors and external stressors. Personal factors include anything from genetic predisposition, poor parenting, inadequate emotional bonding and a history of sexual abuse. Stressors include any event that had a negative impact on the child

such as being angry or sexually aroused (Hoghughi 1997). One of the researcher's five-year-old clients received poor parenting as well as inadequate emotional bonding from his parents. His parents openly admitted to belong to a "swingers club" where husbands and wives change sexual partners for a night. The client was easily sexually aroused due to his genetic predisposition. On days that he got angry with his parents he would sexually molest his peers. This boy's abnormal sexual behaviour can be understood if you take into account his genetic predisposition, poor parenting and overt sexual exposure (parents advocating promiscuity) together with a stressor such as getting angry with his parents.

2.13.7 The developmental theory

The developmental theory focuses on the development of the child. Deviant socialisation experiences such as sexual abuse and poor parenting, distort the normal sexual development of children (Hoghughi, 1997). Gil and Johnson (1993:27) agree that the result of sexual abuse causes interruption in the normal sexual development of a child. Research shows (Finkelhor and Brown, 1986; Gil and Johnson, 1993; Gordon, Schroeder and Abrams, 1990 and Hoghughi, 1990) that children who have been sexually abused develop an unusual or excessive preoccupation with sexual matters. According to the developmental theory (Hoghughi, 1997), children and adolescents may seek opportunities for deviant sexual behaviour. The failure to develop secure emotional attachments with parents may result in a vulnerability factor towards sexually abusive behaviour (Hoghughi, 1997: 20-36). These children are deprived and have discovered that they can achieve attention through sexually abusive behaviour.

2.13.8 Learning theories

There are three learning theory perspectives. Classical conditioning is based on the assumption that sexually abused male children may see 'being a male' in terms of sexual abuse. By operant conditioning children learn to manipulate their environment to satisfy their needs. By learning through trial and error, they learn to identify what will help them to get what they want. Social learning is concerned with learning through the example set by others. Being a victim of sexual abuse or witnessing other children and parents engage in sexual behaviour, or watching pornographic films, teach the child actual ways in which to perform sexual acts (Hoghughi, 1997). Finkelhor and Brown (1986) as well as Gil and Johnson (1993) state that the cycle of sexual abuse is based on the learning theory where children learn abusive sexual behaviour through repeated conditioning with positive or negative reinforcement. The researcher has counselled many pre-school children who molest their peers after witnessing their parents engage in sexual intercourse or by watching pornography. These children did not come from dysfunctional homes nor were they victims of molestation. They have learnt sexually abusive behaviour through example, and the behaviour was reinforced due to sexual arousal.

2.14 MAINTENANCE OF SEXUALLY ABUSIVE BEHAVIOURS

The sexual abuse cycle was developed by S. Lane and is used in the majority of treatment programmes throughout the world to treat perpetrators of sexual abuse of all ages (Erooga and Masson, 1999). The sexual abuse cycle links negative affective

states and deviant sexual fantasies. It involves dysfunctional responses to problematic situations or interactions. The responses are based on distorted perceptions relating to power and control, which become sexualised. The child's experiences, outlook and beliefs predispose a particular response to an event or problem with emotions of helplessness. This event is experienced as stressful and then anticipated as unsafe and negative. Feelings of hopelessness are accompanied by an urge to avoid the issue, the feelings and the anticipated outcomes. Not being successful in avoiding the situation, lead to emotions of resentment and defensiveness. As compensation, there is now an attempt to exert power over others in a non-sexual way. Although effective, the duration of the effect is temporary, resulting in considering further power-based behaviours such as sexual behaviours. The exertion of control is eventually expressed sexually. Now there is a need to cope with the reality of the sexual behaviour and the fear of the external consequences of being discovered. The inability to tolerate this anxiety leads to the behaviour becoming assimilated through a series of cognitive distortions or reframing. The cycle represents a series of maladaptive coping mechanisms that, for the present, lessen discomfort but do not resolve the problem (Erooga and Masson, 1999:12-14).

A case study of the researcher will be used to explain the sexual abuse cycle. The client, a six-year-old boy, was molested by a peer. This event triggered a negative self-perception and feelings of helplessness. He subsequently experienced negative expectations when he was with boys in his peer group. He had the desire to avoid playing with boys because he anticipated being molested by one of them. In the class situation he could not avoid boys in his peer group, which made him feel resentful and defensive. He attempted to exert power over the boys in a non-sexual way by

becoming physically aggressive. This aggression or power was effective, as the teacher separated him from the rest of the class until it was time to go home. The duration of the separation was temporary because the next morning they were together in the classroom again. He considered further power-based behaviours, such as sexually molesting a boy. He became aroused as he recalled his own sexual abuse. His control and power was expressed sexually by molesting a boy in the peer group. After the molestation he feared being caught out. He became anxious, which resulted in a negative self-perception. The cycle represents a series of maladaptive coping mechanisms that temporarily alleviate discomfort but does not solve the problem.

The sexual abuse cycle can be used to understand the pattern of thinking of the perpetrator, as well as his behaviour and emotional responses to sexual abuse. The perpetrator can consciously develop other ways of coping with stress or abusive stimuli and in this way reduce the likelihood of further sexually abusive behaviour.

2.15 CONSEQUENCES FOR THE PRE-SCHOOL CHILD AFTER BEING MOLESTED

Most studies indicate that childhood sexual abuse is often a traumatic experience and frequently associated with behaviour and emotional problems. The initial effects that have been widely recognised are fear, anxiety, depression, anger, hostility, aggression, sexually inappropriate behaviour, self-destructive behaviour, poor self-esteem, distrust in others as well as re-victimisation of peers (Gil and Johnson, 1993;

Hoghughi, 1997; Jehu, 1990; Johnson, 1995; Kelley, 1993; Maletzky, 1991; O'Hagen, 1989; West, 1985 and Wyatt and Powell, 1988).

Leifer, Shapiro, Martone and Kassem (1991) have measured the psychological functioning of sexually abused children and compared them with a control group. The Rorschach Inkblot Test has been used in three investigations related to dysfunction within sexually abused children. The sexually abused children showed more disturbed cognition, higher levels of stress, described human relationships more negatively and showed more preoccupation with sexuality.

Finkelhor (1979) and Gil and Johnson (1993) refer to the intense dispute of the last fifty years about the serious consequences of child sexual molestation. On the one hand, there are those who argue that the children are not traumatised by sexual molestation. Earlier studies by Kinsey (1956), Landis (1956), Burton (1968) and Yorukoclu and Kempf (1969), point out that the vast majority of sexual offences against children are harmless affairs and should be treated as minor and transient hazards of childhood. They compare being sexually abused to many ordinary things that are frightening to children, such as a trip to the doctor or a ride on an aeroplane. The pain passes quickly and the victims do not suffer any long-term consequences. Kinsey (1959) points out that he finds it difficult to understand why a child, except for cultural conditioning, should be disturbed at being sexually molested. On the other hand, there is far more research that indicates the traumatic outcomes of such sexual experiences (Erooga and Masson, 1999; Finkelhor, 1979; Gil and Johnson, 1993; Johnson, 1995; Hoghughi, 1997; Jehu, 1990; Kelley, 1993; Leifer, Shapiro, Martone and Kassem, 1991; Maletzky, 1991; O'Hagen, 1989; Wardle, 1995; West, 1985 and

Wyatt and Powell, 1988). The researcher has noted that recent research indicated that children are traumatised by sexual molestation while, earlier research done during 1959 and 1969 indicated that victims were not seriously affected by molestation. These studies could have been influenced by Freud (1953) who assumed that victims of sexual molestation are not traumatised (Finkelhor, 1979). Finkelhor (1979) has noted that those who believe sexual molestation does not harm children often demand proof of unreasonably serious psychological consequences before accepting that any trauma occurred. If the victim avoids being institutionalised, they often concluded that no serious damage had taken place. The real issue is not how much harm has been done to the child, but whether harm has been done and how it could have been avoided.

The researcher has worked with many children who have been sexually abused and agrees that most children who have been sexually molested, show behaviour and/or emotional problems to some degree. The researcher has also spoken to many adults who have been sexually molested as children and most of them suffer from depression, eating disorders, sexual problems or a low self-esteem. The victim's interpersonal vulnerabilities, perceived powerlessness and stigmatisation cause him to lack self-worth. This feeling of not being worthy, creates re-victimising opportunities in an adult relationship. Alcohol and drug addiction may also function as a chemically induced dissociation, invoked as a coping response to negative affects, memories and situations.

A great deal of research has been conducted regarding the consequences of molestation on children (Erooga and Masson, 1999; Finkelhor, 1979; Gil and

Johnson, 1993; Hoghughi, 1997; Jehu, 1990; Johnson, 1995; Kelley, 1993; Leifer, Shapiro, Martone and Kassem, 1991; Maletzky, 1991; O'Hagen, 1989; Wardle, 1995; West, 1985 and Wyatt and Powell, 1988). Psychological and behavioural consequences of sexual molestation of the pre-school child will be outlined below.

2.15.1 Sexualised behaviour of the pre-school child victim

Finkelhor and Browne (1986:186-187) categorised four separate domains in which a variety of psychological and behavioural concerns develop: sexualisation, stigmatisation, betrayal and helplessness. For the purpose of this discussion, the focus is on sexualisation.

Finkelhor and Browne (1986) state that sexually molested children are taught and consequently learn to behave in a sexually inappropriate way. These children learn through repeated conditioning with positive or negative reinforcement. Offenders exchange attention for sex, which is a positive reinforcement; or they withhold punishment in exchange for sex, which is a negative reinforcement. In either way, the child learns to perform sexual acts for different reasons. Children learn that sexual behaviours are necessary to meet their needs. One child might allow her friend to sexually molest her in exchange for acceptance and friendship which she desperately needs. Another child may exchange sex from her brother for protection against a drunken physically abusive father. Inevitably, sexually abused children become confused about sexuality and negative associations are created between sexuality and care giving and care taking. In addition, normal sexual development is hampered by inappropriate and excessive focus on sexual feelings and behaviours

that would usually surface gradually during puberty. Sexually abused children therefore develop unusual and excessive preoccupations with sex and may ultimately engage in inappropriate sexual acts with other children or adults.

Gil and Johnson (1993:57) refer to Yates who maintains that sexually molested children become what he refers to as “eroticised”. He argues that because sexual responsiveness does not require cognitive skills, even pre-school children can become eroticised. Yates (1987) maintains that many sexually molested pre-school children fail to differentiate between affectionate relationships and sexual relationships, and become aroused by non-sexual physical or psychological closeness. For these children erotic expressions become so gratifying that they become highly erotic, easily aroused, highly motivated and readily orgasmic, depending on the intensity or duration of the molestation they have experienced. Yates (1987) concludes that these children develop a dependence on sexual exchange to retrieve a sense of integrity and self-esteem (Gil and Johnson, 1993:57).

Gil and Johnson (1993) refer to the trauma model, which asserts that traumatic events need to be processed in order for the victim to return to healthy functioning. Van der Kolk (1989) in Gil and Johnson (1993:58) agrees that trauma is repeated on behavioural or emotional levels. He explains that the repetition of the trauma is unconscious and it may provide a temporary sense of mastery or even pleasure, but it ultimately perpetuates chronic feelings of helplessness and a subjective sense of being bad and out of control. These children develop a fixation as they re-enact the molestation in their attempt to master or more fully integrate the sexual experience. Most child perpetrators counselled by the researcher, admitted that they want to stop

sexually abusing their peers, but they are sub-consciously forced to continue. The child goes from being a passive victim to an active perpetrator while he experiences a temporary relief of helplessness, terror, anxiety and vulnerability.

Garland and Dougher (1990), according to Gil and Johnson (1993:56), question whether adult victims of child molestation re-enact their abuse on children, and recommend continued research on this issue. They argue that the abused/abuser hypothesis is simplistic and misleading. However, many authors (Erooga and Masson, 1999; Finkelhor, 1979; Gil and Johnson, 1993; Hoghughi, 1997; Jehu, 1990; Johnson, 1995; Kelley, 1993; Leifer, Shapiro, Martone and Kassem, 1991; Maletzky, 1991; O'Hagen, 1989; West, 1985; Wyatt and Powell, 1988 and Wardle, 1995) agree that children who molest other children are re-enacting their own sexual abuse. Gil and Johnson (1993) state that the sexual behaviour may include emotions of aggression and heightened sexual arousal. Matsuda and Rasmussen (1990) in Gil and Johnson (1993) refer to these children as sexually reactive. They display sexually inappropriate behaviour towards other children, which is harmful and may adversely influence the normal development of the victim (Gil and Johnson, 1993; Wardle, 1995). Clinicians and researchers who focus on the effects of sexual abuse have agreed that these children have increased sexual behaviours (Browne and Finkelhor, 1986; Gil and Johnson, 1993; Gordon, Schroeder and Abrams, 1991; Harper, 1990; Kelley, 1990 and Wyatt and Powell, 1988). The sexual abuse may increase the child's interest in the sexual behaviours and stimulate the victim to desire a repetition of the sensation. Others repeat the sexual behaviour to understand or master the trauma of the sexual abuse (Johnson 1995:7-8). The researcher is aware of the complaints from teachers of children who have been

sexually molested. These children become disruptive and attention seeking and develop an irresponsible display of power. The researcher assumes that these children are in need of ways in which to decrease their feelings of anxiety, helplessness and confusion, and therefore engage in sexual behaviours because they find it rewarding. According to the teachers, these children become obsessed with acting out inappropriate sexual behaviours with peers, and these behaviours interfere with their schoolwork and activities. They seem to lose interest in their schoolwork as well as in the games and activities of children.

Finkelhor (1979) refers to this sexual preoccupation as traumatic sexualisation. Wyatt and Powell (1988) refer to this increased sexual awareness and altered emotional reaction to sexual issues as Sexually Abused Child's Disorder. Leifer et al (1991) write that sexually abused children are taught to behave in sexually inappropriate ways. They develop an unusual and excessive preoccupation with sex and will ultimately engage in inappropriate sexual behaviour. The researcher agrees that the sexually molested child develops inappropriate sexual behaviours. The sexual behaviours that the researcher has treated in children who have been molested include the following: oral sex between children; simulating sexual intercourse in the nude; sexual intercourse; an attempt to have sexual intercourse; putting an object into their genitals or rectum; masturbating a victim and forcing a victim to masturbate the perpetrator.

According to Finkelhor (1979) and Shapiro (1991), the sexually abused child has been exposed to a twisted version of human sexuality, which causes traumatic sexualisation. Children who have been sexually abused by a person of the same

gender may develop a sexual identity problem due to the possible perception that they have been forced into an opposite gender role (Shapiro, 1991; Wyatt and Powell, 1988:266). The researcher counselled a boy who shows interest in his own gender after being sexually molested by a male. As a result of being sodomised, the boy has developed a fixation with a penis. He would sneak up to his peers and peep at them when they urinate, causing him to have an erection while observing their penises. This adult sexual dysfunction developed as a result of the boy being molested by a perpetrator of the same sex.

The researcher has noticed that most children who have been sexually abused show inappropriate sexual behaviour. The inappropriate sexual behaviour was often the first symptom indicating that sexual abuse had occurred. These children would then be referred to the researcher for an assessment. The researcher has found that the inappropriate sexual behaviour that occurs most often in molested children, is oral sex.

2.15.2 Behaviour problems of the pre-school child victim

Susan Kelley (1990) compared the behaviour of 67 pre-school children who were sexually abused at a day-care centre to 67 non-abused children using the Child Behaviour Checklist of Achenbach and Edelbrock (1993). Children from the abused group scored significantly higher on behaviour problems than the non-abused children. The behaviour problems included aggression, nightmares, clinging behaviour, bedwetting, faecal soiling, crying, school problems, tantrums, truancy, fear, somatic complaints, sleep disorders, overly compliant behaviour and sexual

problems. These findings are in accord with findings from other research (Erooga and Masson, 1999; Finkelhor, 1979; Gil and Johnson, 1993; Hoghughi, 1997; Jehu, 1990; Johnson, 1995; Kairys, Alexander, Block, Everett, Hymel and Johnson, 1999; Kelley, 1993; Leifer, Shapiro, Martone and Kassem, 1991; Maletzky, 1991; O'Hagen, 1989; Paradise, Rose, Sleeper and Nathanson, 1994; West, 1985; Wyatt and Powell, 1988 and Wardle, 1995).

Finkelhor (1979:77) writes that the feelings of fear and anxiety reflect the experience of having been unable to control the molestation and lead to symptoms such as nightmares, sleep problems, bedwetting, eating disorders and somatic complaints such as headaches and stomach pains. Having been unsuccessful in protecting himself, the victim has a low sense of efficacy. This translates into learning problems, tantrums and crying. This powerlessness produces a compensatory reaction to control someone or themselves. This leads to aggressive and delinquent behaviour, all stemming from the desire to be powerful. The researcher has found that after sexualised behaviour, aggressive behaviour is most often found in children who have been sexually molested. Aggression of sexually molested children is associated with their feelings of despair, frustration and helplessness. These children often displace their anger to another child, the parent or the teacher. The researcher has also found that some victims of molestation may inflict injuries on themselves to recover from dissociative experiences. Gil and Johnson (1993:183) define dissociation as a defence mechanism that protects the victim by splitting the emotional self from the physical self, causing the victim to feel no emotions. For example, a victim may deliberately cut herself with a knife, and when she sees the blood, she regains her physical and emotional feelings.

2.15.3 Emotional problems of the pre-school child victim

Research indicates that the emotional problems of a child that has been sexually molested include the following: lowered self-esteem, loss of trust, depression, anxiety, hostility, withdrawal, shame, a sense of being different from others, powerlessness and guilt (Erooga and Masson, 1999; Finkelhor, 1979; Gil and Johnson, 1993; Hoghughi, 1997; Jehu, 1990; Johnson, 1995; Kairys, Alexander, Block, Everett, Hymel and Johnson, 1999; Kelley, 1993; Leder, Emans, Hafler & Rappaport, 1999; Leifer, Shapiro, Martone and Kassem, 1991; Maletzky, 1991; O'Hagen, 1989; Paradise, Rose, Sleeper and Nathanson, 1994; West, 1985; Wyatt and Powell, 1988 and Wardle, 1995). Finkelhor (1979) writes that depression is often caused by feelings of disenchantment, disillusionment and mistrust of trustworthy people. Briere (1992:31) explains that children who are depressed show signs of apathy, withdrawal, lack of interpersonal responsiveness and visible sadness. They use hostility and distrust as primitive ways to protect themselves from further sexual abuse and betrayals. Victims of sexual abuse often feel isolated and stigmatised and become withdrawn. They have a low self-esteem, as they often believe they are the only people who have had the experience and that others will subsequently reject them. Briere (1992) explains that victims of sexual abuse often have negative thoughts and beliefs, for example, "I am stupid, worthless and bad". These self-negating thoughts influence their self-esteem as they develop derogatory and depressive cognitions. They often regard themselves as bad and deserve to be abused. According to Susan Keller (1990) research done by David Finkelhor (1988) and K.C. Faller (1990) shows that victims of sexual abuse have a poor self-concept.

The perpetrator often blames the victim and the victim sees herself as “damaged goods”.

Leifer et al (1991) found that the extent of emotional distress in abused children positively relates to intelligence and to academic achievement. The researcher agrees and has found that these children who are described by their teachers as very intelligent, will ask many questions and continuously strive to understand the cause and consequences of the sexual abuse. In their search for answers, these victims tend to become more depressed and confused, because they still lack understanding.

Research by Finkelhor and Browne (1986) and Shapiro (1991) showed that sexually abused children scored significantly lower in social competence. Their feelings of powerlessness result in disempowering them to bring the sexual abuse to an end. The researcher has noticed that victims fail to take self-protective actions. They allow the situation to continue and do not take action to stop the molestation. They are often passive and have only a few friends, which make them especially vulnerable. Finkelhor (1986) and Shapiro (1991) agree that victims often feel a sense of powerlessness and helplessness due to the fact that they were unable to control the sexual molestation. As a result of the abuse, victimised children often feel guilty about the consequences to persons other than themselves (Keller 1990). They also feel guilty because they feel stigmatised. If they experienced any pleasurable sensations during the sexual molestation, it would increase their feelings of guilt. Some perpetrators cause the victim to feel responsible for their behaviour. These children grow up believing that they are bad.

Because of the sexual molestation, victims of molestation are often prone to feelings of fear and anxiety. Sexual molestation interferes with the child developing a sense of security and belief in a safe, just world (Briere, 1992). As a result of their anxiety, they often react with hyper vigilance to danger, whether objectively warranted or not. They could also develop a preoccupation with control, with the belief that a slight loss of power or self-protection could lead to danger. They often misinterpret neutral interpersonal stimuli as evidence of threats of being molested (Briere 1992).

2.16 SUMMARY

In this chapter the researcher has examined the general physical and emotional development of the pre-school child while emphasising their sexual development. It included a discussion of a continuum of sexual behaviours of the pre-school child, the development of these sexual behaviours as well as the characteristics of the child that shows these sexual behaviours. Furthermore, the influence of the sexual behaviours on the victim was addressed. Finally, this chapter discussed theoretical models to facilitate the understanding of molestation and the consequences thereof on pre-school children after being sexually molested.

In the following chapter the researcher focuses on the home environment of the pre-school child in order to address the diverse conditions that bring about normal and healthy sexual development or problematic sexual behaviours in pre-school children.

CHAPTER 3

The influence of the home environment on the pre-school child

3.1 INTRODUCTION

Gil and Johnson (1993:101) maintain that sexualised and molesting behaviours do not emerge in a vacuum. The home environment is of critical importance in the sexual socialisation of pre-school children. The way sex and sexuality are expressed and how parents relate to one another, differs in each family and subsequently influences the sexual development of pre-school children (Erooga and Masson, 1999). When assessing the sexual behaviour and knowledge of pre-school children, social workers must address the home environment of these children. Sexual abuse can only be prevented when parents are educated and assisted in creating a neutral and safe home environment for their children. Parents are subconsciously involved in the sexual abuse of their children, but more often than not parents do not see themselves as part of the prevention system.

In this chapter the researcher examines the home environment that moulds the sexual development of children. The following home environments will be discussed: sexually neutral homes; sexually repressed homes; sexually and emotionally needy homes; homes in which sex is used as a commodity; sexually abusive homes and

multigenerational sexually abusive homes. The researcher will discuss the influence of family dynamics, such as overt (detectable) and covert (indirect) sexual abuse and the social environment, including the media, on the sexual development of the child.

3.2 THE PSYCHOSEXUAL EQUILIBRIUM IN THE HOME

Gil and Johnson (1993:102) and Friedrich, Grambsch, Broughton, Kuiper and Beilke (1991:456) emphasise that the sexual behaviour of the child does not develop in isolation. From the earliest period of the life of the child, the home environment will reciprocally influence the sexual characteristics of the child.

Friedrich et al (1991:457) maintain that the psychosexual equilibrium in the home environment is influenced by the following factors: the onset of parenthood; the sexual adjustment of the parents; the sexual development of the child and the impact of the child's sexual development on the sexual adjustment of the parents. They explain how a family in which parenthood begins in adolescence has different psychosexual issues over a period of time than a family in which parenthood begins in adulthood. The emergence of a child's sexual interest can set off a series of transactions leading eventually to sexual misuse in a family where the parents feel trapped, their sexual experiences are curtailed, and marital instability exists. Each family develops an adaptive capacity that will change with time.

3.3 A CONTINUUM OF SEXUAL ENVIRONMENTS IN THE HOME

Johnson in Gil and Johnson (1993:16-18) describes six different sexual environments which can be found in homes. These homes range from sexually neutral; sexually repressed; sexually and emotionally needy; sex as a commodity; sexually abusive to multigenerational sexually abusive homes.

3.3.1 Sexually neutral homes

In these homes, supportive, healthy and natural sexual socialisation takes place, including parent orientated sex education for children. These families have boundaries for nudity, limiting nudity to going to and from the bathroom and changing clothes. Children are not allowed to watch explicit sexual television programmes, videos, Internet or movies (Gil and Johnson, 1993). Hoghughi (1997:5) emphasises that children in these homes are adequately supervised to prevent sexual molestation. The researcher has not yet counselled children who are victims of molestation and who come from sexually neutral homes. The assumption is made that sexual abuse seldom occurs in homes where natural sexual socialisation takes place, where children receive parent orientated sex education and adequate supervision of young children is provided.

3.3.2 Sexually repressed homes

In sexually repressed homes sex is experienced as a “dirty activity” and the family values reinforce this belief. In these homes sexuality is not acknowledged openly, parents fail to sex educate their children but warn their children against the evils of

sex by using religious teachings. Sexuality is forbidden and therefore sexual thoughts and feelings are unacceptable. Children from these homes may feel compelled to seek information from peers or pornographic magazines or videotapes, which could progress to children engaging in forceful sex out of frustration (Gil and Johnson, 1993). While conducting sex education workshops with school children, the researcher was informed by many of the children that they turn to the Internet, pornographic magazines or videos for answers, because sex is not discussed in their homes. Some of these children also admitted that the urge to watch pornographic material is becoming obsessive and compulsive. School teachers perceived a decrease in the concentration level of these children who admitted to their compulsive urge to watch pornography.

3.3.3 Sexually and emotionally needy homes

In a sexually and emotionally needy home, sex is used to meet the emotional needs of unsatisfied yearning adults. These parents generally come from an abusive and neglectful background and they are constantly in search of love, companionship and caring. Amongst the people they attract, a loving relationship is difficult to find, and sex is often a substitute for love. Sex is confused with real love, which results in parents compensating sex for love. When the parent is without an adult sexual partner, the child could be used as a substitute sexual partner. The incestuous parent is frustrated, helpless and in pain and has chosen a child to meet his or her needs to feel superior, in control and comforted. Sexually abusing parents focus mainly on their own needs and do not comprehend to what extent they are abusing the child, although the child is aware of fulfilling the emotions and sexual needs of the

parent. Using the child as a substitute only lasts until the adult finds a new partner. Parents using their children as substitutes, have weak physical boundaries and they may sleep and bath with their children or allow their children to witness sexual acts within the family. As a result of weak emotional boundaries, the parent depends on the child for support, companionship and caring which aggravates the need of this parent to turn to the child for his sexual needs. Johnson in Gil and Johnson (1993) conclude that the emotional, physical, and sexual boundaries in these families are poorly managed.

The adult relationships in these families are based on attempts to fulfil intense emotional and sexual needs and aggressive interaction between the adults are frequent. When parents are living together as sexual partners, the aggressive interaction between children and parents may be frequent because the children compete with the abusive parent for the attention of the victim parent. The motive for the aggressive interaction of the child is to protect the victim parent and to seek emotional comfort for herself (Gil and Johnson, 1993).

3.3.4 Sex as a commodity

In homes where sex is used as a commodity for money and drugs, children could also be used as prostitutes. Parents do not sexually abuse their own children, but in many of these homes children observe the sexual activities of their parents. Although sexual molestation does not take place, there is a lack of formal education and general concern for their children, as the adults focus on their own needs while ignoring the needs of the children. The children often witness physical aggression as

a pimp or a customer, who is under the influence of alcohol or drugs, beats the mother. Because of the emotional needs of the children and their exposure to sex, they may engage in incestuous behaviours between siblings. The norms and values of these families support such incestuous behaviours between siblings (Gil and Johnson, 1993; Erooga and Masson, 1991). The researcher agrees with the opinion of Gordon, Schroeder and Abrahams (1990:250) and Finkelhor (1984) that sexual abuse is more prevalent in lower socio-economic families and families from single parent homes, especially where the mother has not completed her school career.

3.3.5 Sexually abusive homes

Johnson in Gil and Johnson (1993) maintain that in sexually abusive homes, one or both parents abuse the children sexually. Sometimes sexual abuse of the child by one parent takes place without the knowledge of the other parent. In some cases, the one parent could be aware of the sexual abuse, but is unable to step in and end the abuse. This is because the perpetrator is often the parent that provides for the family, and disclosing the abuse might lead to severe financial repercussions. These sexually abused children could be unsure of the support of the non-abusive parent and therefore they endure the abuse. When the sexual abuser believes that the child victim will be supported by the other parent, he uses threats to keep the child quiet (Gil and Johnson, 1993). Johnson (1993) and Erooga and Masson (1999) agree that the misuse of alcohol or drugs often occur in these homes.

3.3.6 Multigenerational sexually abusive homes

Johnson in Gil and Johnson (1993:17-18) maintains that in multigenerational sexually abusive homes, there are continuous incestuous activities between grandparents, parents, siblings and sometimes even extended family members. The sexual abuse is committed by the more powerful member of the family and those with less power are the victims. Although some of these relationships appear to happen by mutual consent, it is impossible for the individuals to give consent because of covert and overt sexual messages that are prevalent and which confuse the individuals about sexual expression and its limits and boundaries. For generations the family members are not adequately socialised about emotional and physical boundaries. Compliance is gained by threats of physical punishment, physical and emotional bullying, or by taking away basic needs such as food and sleep from the child. Sex and aggression are socialised simultaneously and the sexual vocabulary is violent and degrading. The bodies of children are used as tools for the enjoyment of adults. The touching of the child's body is for the pleasure of someone else, and not for the comfort of the child. Distress, tension, anger, fury and cruelty become associated with sex. The core of the relationship is sex and need, as opposed to love and caring. Sex becomes a way to stop emotional pain and emptiness. In these homes children do not learn to trust adults, because the adults do not set a trustworthy example. Sometimes these children, not knowing whom to trust, are molested outside the home as they seek emotional satisfaction. These children are also not adequately socialised about emotional and physical boundaries. Because they learn from their own experience of how they are treated as well as from observing their parents,

these children do not realise when they are sexually intruded upon or when they are sexually intruding on someone else (Gil and Johnson, 1993:17-18).

It is clear that children are vulnerable to sexual abuse as a result of living with a family where parents fail to provide the needed sexual guidance, sexual limits and nurturance to their children.

3.4 FAMILY DYNAMICS IN THE HOME ENVIRONMENT

Gil and Johnson (1993:102) maintain that there are two primary family types in which sexual abuse occur: overt and covert. Families in which overt sexual abuse occur, engage in detectable behaviours. Covert sexual abuse in families occurs when a sexualised atmosphere is created and inappropriate attitudes are verbally and non-verbally communicated.

3.4.1 Overt abuse in the home environment

In cases of sexual abuse, family dynamics have more similarities than differences. Research by experts (Erooga and Masson, 1999; Gil and Johnson, 1993; Hoghughi, 1997 and Parks, 1990) reveal that individuals in these families have low self-esteem and insufficient social competence and problem-solving skills. Friedrich et al (1991) maintain that incestuous families have high levels of personal, social and economic stress, substance abuse, and exaggeration of patriarchal norms. Gil and Johnson (1993) state that individuals in these families suffer from impulsivity; low frustration tolerance; an incapability to identify or meet their needs; communication deficits;

feelings of helplessness and futility as well as frequent and unresolved losses which result in interpersonal isolation. Hoghughi (1997) found that members of the dysfunctional family are verbally inhibited and have great difficulty in expressing their thoughts and feelings.

The following situations in the family could contribute to overt abuse in the family.

3.4.1.1 Interdependency of the family

Gil and Johnson (1993) emphasize that the interdependency of the family traps the members within the dysfunctional patterns. Alliances are formed to prevent disclosure of the sexual abuse to keep the family intact. These families may even respond to the disclosure of sexual abuse with denial or failure to protect the child. The incest is described as a family group survival pattern or as a family affair.

3.4.1.2 Parentification

Gil and Johnson (1993) maintain that these families also have high levels of personal, social and financial stress, misuse substances and have patriarchal norms. Parenting skills are characterised by high degree of frustration, punitive child-rearing skills and triangulation, which refers to the process of involving children to meet certain goals in an adult relationship. In incestuous families, the person with the least power becomes the victim. A process called Parentification, or role reversal, takes place, which means the child is introduced to premature and excessive care taking responsibilities. In incestuous families, the symptoms of pain or helplessness manifest as deviant sexual behaviour.

3.4.1.3 *Inadequate parenting*

Research conducted by Hoghughi (1997:63), Jehu (1990:18) and Erooga and Masson (1999:7) showed that the perpetrator received inadequate parenting, was the victim of sexual abuse, and was exposed to inappropriate sexual role models. During childhood, perpetrators learn how to sexually abuse, and when the opportunity arises they use their cognitive distortions to justify the act. These distortions justify, rationalise or support sexually abusive behaviour. Cognitive distortions include beliefs which contradict objective evidence that most people do not believe, such as sexual activities are not harmful to children and that it is a natural way of introducing them to sexual relationships.

Research by Erooga and Masson (1993:9) indicates that the perpetrator often has sexual fantasies and masturbates to these sexual fantasies. Jehu (1990:17) warns that this sexual dysfunction results in promiscuity. Faller (1989:34) has noticed that sexual abuse often starts with a compulsive behaviour followed by a ritualised sequence of events surrounding the sexual abuse.

3.4.1.4 *Alcohol and drug misuse*

Researchers (Erooga and Masson, 1999:7; Faller, 1989:34; Gil and Johnson, 1993; Hoghughi, 1997; Jehu, 1990:17 and Parks, 1990:31) have found that drugs and alcohol are misused in dysfunctional families and often used prior to sexual assault and can be seen as a contributing factor to overt sexual abuse.

3.4.1.5 *Social isolation of the family*

Jehu (1990:180) and Faller (1989:34) report that social isolation is also a feature of the dynamics in sexually abusive families. The outside world is viewed as hostile and only members of the family are trusted. All social needs are met within the family. This isolated and reclusive life style facilitates sexual abuse within the family and it encourages dependence on the family members for all its needs, while also preventing scrutiny and interference from the outside world.

3.4.1.6 *The patriarchal father*

Gil and Johnson (1993), Jehu (1990) and Parks (1990:29) agree that the incestuous parent is often rigid, secretive, controlling and exhibits diffuse boundaries and role confusion. Parks (1999:31) has found that the perpetrating father, married to a weakling wife who may be cold and bitter, uses his child as a "stand-in" wife, thereby justifying his own self-pity and earning the sympathy of others, including his daughter. The role of wife and mother is slowly transferred to the child. At first the child victim experiences the feeling of importance, but soon she is trapped by her father. Parks (1990:31) further refers to the misogynist (hatred of women) father who sexually abuses his children. He uses physical power and verbal abuse to control his children and they do not question this authority. Jehu (1990:18) further maintains that these father figures exercise absolute authority and control, often maintained by the use of intimidation, threat and force. They see women and children as their property and this includes the right of sexual access. These men believe very strongly in the

subordination of women and the obedience of children, who are often indoctrinated to comply with the demands of other older men. This patriarchal structure entails an imbalance of power, which increases the daughter's vulnerability to sexual abuse, because no member of the family has the power to challenge the father. Incestuous fathers are often sexually inadequate and do not understand the inappropriateness of their behaviour. Gil and Johnson (1993) and Parks (1990:29) agree that the incestuous father has sex with his child to regain a feeling of superiority. In this relationship the incestuous father retrieves his self-esteem for the moment, emotions of superiority prevail, feelings of sexual gratification occur and pain is delayed. The sexual act is motivated by power and aggression rather than sexual desire. Parks (1990) explains that when the child victim experiences feelings of pleasure from the genital stimulation and consequently responds by making overt advances towards the abuser, the child may find that the abuser is suddenly filled with emotions of anger. Gil and Johnson (1993) explain that most incestuous parents have emotions of guilt and increased self-loathing after committing incest. Paradoxically, these feelings contribute to repeating the incestuous crime. The incestuous parent usually has a history of victimisation. Deviant arousal patterns often develop as a product of acquired behaviours and social interchange (Gil and Johnson, 1993).

3.4.1.7 Marital discord as a dynamic of overt abuse

Finkelhor (1979:118) and Faller (1989:33) agree that marital discord is often present in sexually abusive situations. Finkelhor (1979:118) explains why marital disruption is often used to justify sexual abuse. Firstly, when children grow up in families where family discord exists, they receive contradictory messages, especially about sex.

These contradictions leave the children confused and uncertain about appropriate sexual values and they become less capable of coping in abusive situations. Secondly, in families experiencing much conflict, children are not well-supervised and thus more vulnerable to sexual abuse. Thirdly, if the family has been disrupted by conflict or separation, the children may be anxious about losing another loved one. This may produce feelings of desperation in a child and may lead to sexual ties with other family members.

3.4.1.8 Stepfamilies as a dynamic of overt abuse

Research (Erooga and Masson, 1999; Finkelhor, 1979; Friedrich et al, 1994 and Gil and Johnson, 1993) indicated that stepfamilies increase the general vulnerability of the child. Finkelhor (1979) explains that step relatives may justify their sexual abuse because they feel that they are not blood related. Stepfamilies also bring into the family a category of friends and acquaintances who are not so protective towards a stepchild as they might be toward the biological child of the father. When the new stepfather joins the household, he may take up more of the mother's time, and this may be the cause of less supervision of the child than before. Finkelhor (1979) further refers to the Oedipal triangle, which may influence the daughter to become more vulnerable to sexual abuse. The daughter may feel betrayed by her mother, who is now married, or she may feel that she receives less attention. These factors may create a series of emotional conflicts in the daughter, which may leave her vulnerable to sexual victimisation outside the family.

3.4.1.9 *Overcrowding in the home*

Finkelhor (1979:127) explains that overcrowding and large families can also increase the prevalence of sexual abuse in families. When privacy is violated, family members are sexually more accessible to one another and incest could occur. Research by Finkelhor (1979:127) concluded that molestation is more prevalent in large families compared to overcrowding amongst non-family members. In large families, increased sexual abuse may occur due to the greater age span between youngest and oldest siblings. Younger children are more vulnerable when older siblings are beginning to experiment sexually and they may not have learned to control their sexual impulses. The researcher has found that there are more complaints of sexual abuse in black schools where the families are traditionally larger as compared to the size of the nuclear family in western societies. Extended families who are living, together increase the risk of sexual abuse in the family, because distant connections to the family may be less inhibited about taking sexual liberties with children in the household.

3.4.1.10 *Overly dependent mothers*

Jehu (1990:19) explains that mothers of children who are sexually abused tend to be overly dependent, oppressed and depressed with limited social skills, including low self-esteem and poor physical health. She is generally unable to protect, supervise or to guide her daughters who are vulnerable to sexual abuse. The mother does not transmit self-protective and assertive skills to her daughters. The non-abusive mother has poor and distant relationships with their victim children.

Gil and Johnson (1993:106) maintain that most non-abusive mothers are often unaware of their child's victimisation. The non-abusive mother, experiencing emotions of worthlessness and inadequacy, is often emotionally uninterested in her children. The mother can also refuse to participate in a sexual relationship with her spouse and substitute her daughters to provide this service. In contradiction to this, Straus (1988:89) has found that mothers of incest victims are frequently described as incapacitated through mental illness or physical disability or as physically or emotionally unavailable.

3.4.2 Covert abuse in the home environment

Gil and Johnson (1993:104) maintain that covert abuse is difficult to detect and can remain undetected for long periods because there are few behaviours to observe and children are less likely to reveal its existence. The symptoms of the family's underlying problems never manifest themselves through behaviour. Gil and Johnson (1993) further maintain that something prevents the family members to act out underlying problems. There is a level of restraint on the behaviour level, but problems exist on other levels (Gil and Johnson 1993:107).

The following examples explain covert abuse. In a family where violence is used to punish children, the home will be filled with objects such as whips, belts, cattle prods, guns or other intimidating objects. The parents may refer to these objects frequently to manipulate the behaviour of the children. Although the parents never physically abuse these children, the aura of threat exists nonetheless. Covert incest, is created by a climate in which sexual abuse is possible. The nature of the climate in the home

conveys an incestuous message, for example, when a father stares at his daughter's genitals and makes a gargling sound with his saliva, or a father gazes at his daughter while he insists that she washes her vagina and anus repeatedly. Although the children are spared the behavioural incest, the dynamics are still very prevalent.

The intrusion can also be verbal when remarks focus on sexual issues. One of the researcher's clients complained that her father would ask her why she is looking at his penis, when she was not looking him in the eyes. The father would then ask her whether she would want to have sexual intercourse with him.

Gil (1993:104-118) describes the following patterns of covert dysfunction in families: the transmission pattern; sexualised families; sociopathic families; repressed families and emotionally barren families.

3.4.2.1 The transmission pattern as a dynamic of covert sexual abuse

Gil and Johnson (1993:108) explain that the transmission pattern is a process whereby the parents consciously or unconsciously transmit their desires or frustrations to their children. These frustrations include having sex with a family member, to leave home, to steal, or to physically hurt someone in the family. The following example explains a transmission pattern. In some families, one or both parents share the desire to escape from the family situation, but they do not act on this feeling. The parent's hidden desire is transmitted to the child. The child, in turn, does not seem to be content to allow these feelings to lay dormant, and re-enacts on behalf of the parent by running away from home.

Gil and Johnson (1993:109) maintain that in families with transmission patterns, the child experiences a problem, but it is actually the problem of the parent. Gil and Johnson (1993) give as an example the parent who is frustrated, helpless and in emotional pain, and who has chosen a child to meet his needs of feeling in control, superior and comforted. Although the parent does not act on his impulses by committing an incestuous crime, he conveys his desires to another child in his family, who he triangulates to act out on his behalf. The father would make sexual statements to the child perpetrator about his sister, e.g. "First guy to get into her pants is gonna be one lucky guy." The parent elicits the participation of a sibling to act out on his behalf. The child perpetrator is unconsciously set up by the father to molest the younger sister. When the child perpetrator is confronted, the parent reacts by stating that it is understandable for a child of that age to be curious about sex. The father had incestuous desires toward his daughter but could not commit the crime (Gil and Johnson 1993).

The transmission pattern can also be seen in physically abusive families. The following example explains the process. When a mother feels overwhelmed by the needs of her youngest child, she might make a statement such as "I wish someone will save me from this child". One of the older siblings could then beat the younger sibling to free the mother from his nagging. In this case, the mother does not act out her violent impulses, but elicits a violent response from her older child by transmitting the expectation that a valuable reward would follow if the necessary action was undertaken.

The researcher often encounters similar situations where child perpetrators act out the sexual fantasies of a parent on friends in their peer group. When the parents are confronted with the molesting behaviours of their child, they would react by stating that it is perfectly normal for children of that particular age to be sexually exploring their peers. Some fathers would also admit to their own molesting behaviours as a child. The researcher has also counselled children who re-enact the sexual beliefs of their parents on friends. A father told his five- year-old son that when a woman is in a bad mood she just needs to be “sorted out in a sexual way”. When the boy found his female friends were ignoring him or that they were cross with him, he would run after them, pull them to the ground and masturbate them.

3.4.2.2 *Sexualised families as a dynamic of covert abuse*

Gil and Johnson (1993:111) maintain that in a sexualised family, the children develop an unusual or extreme interest in sexual matters. The child’s excessive focus on sexuality does not evolve in a vacuum, but emerges as a result of exposure to inappropriately explicit sexual information, direct or indirect sexual experience, poor parental guidance or the lack thereof. Gil and Johnson (1993:111) further maintain that erotic interactions which are seductive, exploitive, coercive, or manipulative and serve to use the child’s sexual development behaviour to meet the parent’s needs, have negative ramifications. Sexuality is a fundamental dimension of daily experiences that can contribute positively or negatively to the development and well being of the family.

Gil and Johnson (1993:110) and Finkelhor (1979:23) agree that sexualised families have a preoccupation with sex. They use sexual language, make sexual innuendoes, sexualise their intimate contact, respect few if any boundaries, stimulate others in the family with sexual information, use pornographic videos and magazines and experience a heightened sense of sexual arousal from their environment. Finkelhor (1979) categorises families as sex positive or negative, which influence attitudes about sexuality, eroticisation of family relationships, and the family's respect for or neglect of boundaries.

Gil and Johnson (1993:111) write that in a sexualised family, exhibitionism and voyeurism occur. The nudity of the parent tends to be consciously or unconsciously purposeful with the intent to arouse the viewer. These parents are conditioning their children's arousal to their bodies, and are also satisfying a sexual need of their own. A five-year-old client of the researcher was conditioned by pornography and become aroused by looking at naked bodies. When this child observed his nude mother in the morning, he would molest children in his own peer group at school.

Sexualised parents often insist on bathing with their children and rub or scrub their genitals until the child shows signs of erotic pleasure. The parent may linger over the child's genitals, feeling aroused by the youngster's physical signs of arousal. When the child becomes aroused, the parent encourages further exploration.

When children mature, they may seek privacy. At this point the parents may pull rank on the child and ridicule and humiliate him because of his request for privacy. These families invite and encourage children to show an interest in sexual matters. It is

normal for parents in these families to have sexual intercourse where they could be observed and to give sex education to their children by letting them observe sexual interactions. These homes are highly charged with sexual tension, which will be explained by the following two examples (Gil and Johnson, 1993). A pre-schooler who was simulating sex with his friends at school learned this behaviour when he was allowed to ride “piggy back” on his father during sexual intercourse with the mother. Another child was playing a “rocket game” with his father, which implied that the child masturbated the father or had oral sex with him. Just before the father ejaculates, he would remove his penis from the boy’s mouth and show the boy how far “ the rocket” could “shoot “.

In sexualised families, parents invite and encourage children to show interests in sexual matters. Children are exposed to pornographic videotapes and magazines. Although these children are not overtly sexually abused, sexually explicit scenes over stimulate the children. The researcher often counsels pre-school child perpetrators who have access to pornographic magazines and videos. These children have a heightened sense of sexual arousal and subsequently force or coerce their peers into sexual play. The home environment of these young perpetrators are sexualised, without boundaries for nudity, and frequent exhibitionism or voyeurism occur.

Members of sexualised families are often unable to achieve emotional closeness with each other. They may feel isolated, frustrated, lonely and inadequate. Emotional support and disappointment become progressive and verbal and nonverbal communication decrease. The members of the family may feel incapable of giving or receiving affection or emotional support. This results in progressive emotional

distance within the family and finally both the children and adults feel as if they are coexisting.

One way in which intimacy can be achieved in these emotionally barren families, is through sexual contact. Individuals who initiate sex are often looking for intimacy that usually accompanies lovemaking. In sexualised families, nonsexual needs are sexualised. Intimacy can take on overt and covert sexual expression, as children are perceived as sexual objects.

The family dynamics in these homes create a climate from which sexual abuse can emerge. The end result is that family boundaries are enmeshed and children are at risk of overt or covert sexual abuse (Gil and Johnson, 1993:285).

3.4.2.3 *Sociopathic families as a dynamic of covert abuse*

Gil and Johnson (1993:14) maintain that children from sociopathic families are extremely neglected and psychologically and physically abused. Hoghughi (1997:11) refers to these families as disorganised and chaotic and child sexual abuse is very seldom noticed. Gil and Johnson (1993) further maintain that children from sociopathic families may have been exposed, or involved in sexual activities beyond their developmental level. These children are under-socialised, malnourished and intellectually under stimulated, which cause them to be developmentally delayed. As a result of all the deprivation they have experienced, these children can have a wide range of physical and emotional difficulties.

These families are pervaded by transient friends or relatives and the home is frequently in disarray. New people arrive daily and alcohol and drug abuse is prevalent. In sociopathic families there are perpetual criminal and illicit activities. Adults from these families engage in drug trafficking, petty theft, pimping and prostitution and selling stolen goods. Substance abuse is normal in these families and there is also no sense of morality or a value system. Members of the family are usually unemployed and may collect welfare cheques. Their homes are run down apartments and family members disappear for weeks at a time, leaving their children to fend for themselves. On other occasions, children may watch their intoxicated parents pass out, and they may be forced to act as caretakers for their parents. Strangers in the home may share drugs or alcohol with the children, and may request the children to collect or deliver drugs. They are raised without adequate health care, nutrition or structure. Children have no guidelines for eating or sleeping, and they sleep where they find a suitable place and eat what is available. Children may witness violence or disinhibited sexual activities and often become involved in sexual activities with people who drop in.

In these homes overt and covert sexual abuse take place along with all the other crimes. There is poor supervision of the children, and parents have limited contact with the large community. Children often do not attend school. When they do go to school, they often come to the attention of concerned teachers who may refer them to child protection services. Subsequently, this could result in the family moving to another town.

Gil and Johnson (1993:87) explain that children from sociopathic families are highly manipulative and focus only on their own needs. They have no desire to help others, unless there is an immediate reward for them. Right and wrong are defined entirely within the child's own perspective.

Sociopathic families are prevalent in the Cape Flats where gangs deal with drugs and organised prostitution. The researcher has also been informed of students at colleges who have been threatened with their lives by gang leaders, should they report child prostitution to the authorities. The researcher has been notified by a teacher that school children on the Cape Flats are taken from school to watch pornographic videos. After watching these pornographic videos, the children are forced to re-enact the sexual deeds on the gang members. They are paid for their services from money the gang members earn by selling drugs. These children are also encouraged to experiment within their peer group.

3.4.2.4 Repressed families as a dynamic of covert abuse

Gil and Johnson (1993:14) maintain that in repressed families sex is a forbidden subject and is seen as sinful, shameful and something to hide. Children are warned against the evils of sex and biblical moralizing is used to justify punishment for any sexual thoughts. Children do not have the freedom to ask about sex and any self-touching is prohibited. Parents from sexually repressed families often administer physical punishment when their children are caught playing with their genitals. Some parents will verbally threaten a child who is masturbating by informing him that his hands will fall off if he masturbates. Conflict between parents and their children can

occur when children raise spontaneous questions about sexual matters to their parents

In sexually repressed families, both sexual thoughts and feelings are unacceptable. When the subject of sexuality is forbidden, it takes on a greater appeal and mystery. Children from these families may become agitated and may feel compelled to seek information elsewhere, or find peers who can provide them with answers. This quest may lead children to pornographic material. As a result of being exposed to pornography, these children do not develop a natural progression of sexual interest because their curiosity is combined with the absence of balanced moral guidelines about sexuality (Gil and Johnson, 1993:114-115).

In some cases, parents from sexually repressed families with few sexual outlets or an inability to feel satisfied by sexual contact, may derive pleasure from observing their child's sexual actions. These children can perceive their parents' nonverbal approval of their behaviour, and they continue with their sexual activities in spite of the verbal beliefs of their parents.

3.4.2.5 *Emotionally barren families as a dynamic of covert abuse*

Gil and Johnson (1993:16) refer to emotionally barren families as homes where children are emotionally deprived and physical affection and nurturing are non-existent. The children are neglected by their families and are sometimes left unattended for long periods. Parents from these homes are drug dependent, emotionally immature or borderline mentally retarded. The parents are in emotional

pain and suffer a great deal of pain as a result of deprivation during their own childhood. Parents are simply unable to provide emotional stability to their children, because they were deprived as children. The parents are incapacitated and lack the understanding of what parenting involves.

A role reversal occurs in which the parents turn to their children to have their emotional and sexual needs met. Great efforts are made by the children to meet the needs of their parents and they show remarkable determination and perseverance to control the home environment. These children may turn to their siblings for comfort and physical nurturing. This physical and emotional absence of parents intensifies the mutual dependency and sexual curiosity between siblings. As a result, they seek sexual contact as a natural extension to meet their intimate needs (Gil and Johnson, 1993).

The following example explains an emotionally barren family. In this family where the mother is an alcoholic and prostitute in order to support her expensive daily habit, the children witness their mother having sex with strangers. During the day they help their mother to bath and prepare her meals. These children are extremely lonely and unhappy and despair at being the primary caretaker of their mother. During the night the children will hold each and provide the comfort they long for. Having been exposed to explicit sex, they engage in the exploration of each other's bodies. Soon the exploration develops into incest between brother and sister.

Results from research done by Finkelhor (1979:89) showed that brother-sister incest is far more common than father-daughter incest. More surprising, was the large

number of homosexual incest between siblings. Finkelhor (1979) maintains that sibling incest is underreported because it is less of a taboo and it involves minors, and most important, brother-sister incest does not create the intense rivalry which threatens to upset all family roles, in the same way as father-daughter incest does. Finkelhor (1979) further maintains that brother-sister incest is less offensive, both to the partners involved and to other family members. It is not often discovered, and when discovered, more easily dealt with within the family

Finkelhor (1979:90) reports that most of these incestuous activities happen during the pre-adolescence years of the children. Although sexual acts between siblings occur amongst siblings of the same generation, they were not necessarily peers, but substantially older, ranging from five years and over. Gil and Johnson (1993:81) have found that the average age difference between the sibling victim and perpetrator is four and a half years. When the sexual behaviour involves two brothers, the age difference is three years. Some brothers would even manipulate their sister into permitting their friends or cousins to have sexual intercourse with her. Finkelhor (1979) writes that most cases of sibling incest happen as a result of coercion, force or threats.

Gil and Johnson (1993:145) have noticed that where sibling incest occurs, the relationship between the parents and the children is distant. The mother has several male companions who are emotionally and physically abusive towards her. Substance abuse is frequent amongst parents and the children are physically abused. The biological father never plays a significant role in the lives of the children. Gil and Johnson (1993:83) write that the mother is often hostile towards her son and

it seems as though the son can never please her. This hostility is a displacement of her desire to retaliate against the father of her son.

Research conducted by Gil and Johnson (1993:83) showed that the mothers of boys who molest their siblings, have intense dependency needs. When they do not have an adult male companion available, they would frequently try to diminish their need for comfort and companionship by approaching their sons. The sons would console their mothers when they are alone or weeping. This is in direct contrast to their general hostile behaviour toward their sons and contributes to the confusion for boundaries experienced by their sons. This relationship between the sons and their mothers would last until the mothers have found new male partners; the sons would then be rejected. The sons will live in a continuous struggle between intense jealousy, intense shame, intense need for love and understanding, helplessness and hopelessness and confusion. The jealousy they felt toward their mother's male friends was compounded by the jealousy they felt towards their siblings when they received attention from their mother. This anger was displaced to the siblings whom they then molested. The boys knew that by molesting their sister they could hurt their mothers. The boys had no conscious awareness of sexual desire for their mothers, but the relationship with their mothers were fraught with ambivalence and strong emotions (Gil and Johnson, 1993:83).

3.5 SOCIAL ENVIRONMENTS WHICH PROMOTE SEXUAL ABUSE

Researchers (Erooga and Masson, 1999; Finkelhor, 1979; Gil and Johnson, 1993; Gordon, Schroeder and Abrams, 1990; Hoghughi, 1997; Kelley, 1990; Leifer,

Shapiro, Martone and Kassem, 1991) agree that there are many aspects which generate and sustain sexual abuse.

The following factors and beliefs contribute to a society in which sexual abuse thrives.

3.5.1 Society's overwhelming preoccupation with sex

The prime reason is society's overwhelming preoccupation with sex, which shapes an individual's attitudes to sex and creates an atmosphere in which sexual abuse flourishes. Young children hear about sex from their friends, they read about it in magazines, they notice sex being advertised in the newspapers, they pass sex shops when they do shopping, they hear about sex when they watch television, they see prostitutes on street corners on their way to school and they hear about sexual abuse on the news or even worse, they experience being molested themselves. Almost every ordinary day in the life of a child consist of messages about sex which shape their perception of sex. Some of the perceptions are that everybody is having sex, sex is cool, most teenagers are sexually active, rape pays because the perpetrator gets away with sex, but when the molestation is disclosed, it is often too late to find evidence beyond a reasonable doubt. One of the researcher's clients wrote the words of a love song on a piece of paper, which her father found. He subsequently raped her and justified his actions by stating that she asked for it by writing a poem about her fantasies.

3.5.2 The influence of pornography

After adult pornography was legalised in South Africa during 1996, there has been a decline in values, a violation of children's rights, and a sex industry that has grown into one of the most lucrative and powerful industries of modern times. The global pornography industry makes the world a dangerous place for children as it encourages exploitive sexual behaviour in men. Pornographic material normalises child sexual abuse and it contains advertisements from selling child pornography to sex with children (Barnes-September, Mayne and Brown-Adams, 1999:56).

Meissner in Barnes-September et al (1999:61) states that during the past seven years there has been an increasing flood of pornography in South Africa and during this time there has been an increase in child rape and molestation. This situation originated in 1992 with the lifting of the old Films and Publications Act. In 1996 the new Films and Publication Act legalised pornography in South Africa and this social environment contributes to molestation, because child abusers, rapists and paedophiles can now obtain all the material they need to sexually stimulate themselves and brainwash their victims. The Child Protection Unit of the South African Police Service has reported that there is an increase in child-on-child sexual crimes. It can be assumed that pornographic videos and magazines are freely available to children and this situation is to blame for the sexual behaviour and crimes of children. The under 18 age restriction on pornographic publications is ineffective, because children discover books left lying around by careless adults in their homes, car boots, school recycling depots and second-hand bookshops. The researcher has recently noticed that X-rated pornographic books are on sale next to

the section of children's books at a bookshop in the Southern Suburbs. When confronted, the owner of the shop admitted to selling these books to children. The researcher also spoke to video shop owners who admitted that they hire out pornographic videos without asking for the I.D. documents to check the age of the children who hire these videos.

Pornography is used to arouse those involved in the sexual act. It is also used to lower the inhibitions of children by convincing a reluctant child to engage in sexual activities or pose for sexually explicit photographs. The user often blackmails the child into silence by threatening to show the pictures to their parents and they use the pictures to pressurise the child into continuing with the relationship.

Meissner in Barnes-September et al (1999:61) argues that South Africa is a third world country with a dysfunctional society. It has the highest rates of crime, illiteracy, unemployment, divorce, teenage pregnancies, coupled with problems of housing, all of which will affect the dissemination of pornographic material and the effect on its readers. These social problems expose a market for pornography because it exploits vulnerable and disempowered people who are criminals, illiterate, unemployed or impoverished. South Africa is fast becoming known as the sex tourism destination of the world, because child prostitutes are readily available and affordable.

3.5.3 Poverty in families

Paradise, Rose, Sleeper and Nathanson (1994:452) also agreed that poverty, as a social factor, contributes to sexual abuse. In poor families there is a struggle for food,

clothing and shelter, and the perpetrator could exchange sexual favours for basic needs. In poor families, the parents often do not have money for aftercare services and the children are unattended or with unfamiliar childminders while the parents are at work. A stranger or unfamiliar childminder may abuse children sexually because they have no interest in protecting them. Poor families often do not have money for their children for transport to school. These children walk to school and may be enticed by strangers into a sexual relationship in return for a free ride, or the children are molested while walking to school.

In South Africa a large proportion of the population lack basic facilities. Families are without a home, water or sanitation. Young children have to bath in rivers and use the open fields when they need to defecate. These circumstances cause the children to have their bodies exposed to cruel men that molest them. (Barnes-September et al, 1999:61)

3.5.4 Marital discord of parents

Gil and Johnson (1993), Laws (1989), Finkelhor (1979), Jehu (1990) Erooga and Masson (1999) and Paradise et al (1994:456) agree that marital discord, divorce and the separation of children from their parents could contribute to sexual abuse. The family unit is essential for affection, emotional support and development of children. When the family breaks up, it can no longer provide the protection that is necessary. When children live with or visit their father, they are particularly in danger of being molested because the father could try to hurt the mother by molesting their children. Children from broken homes often grow up without love, protection, and basic needs,

and also without developing appropriate behaviours that support social adaptation and interaction. Child victims of sexual abuse live in a milieu of abandonment. They lack adequate attention, support, affection and love. Children who receive inadequate parenting are likely to seek affection elsewhere. This may cause them to be vulnerable to sexual molestation. Hoghughi (1997:24) stresses that children that molest other children lack proper parenting, which involves caring, control and the development of the children. Caring includes the physical, emotional and social well-being of the child that needs to be satisfied. Control concerns the setting of boundaries for appropriate behaviour, reflecting the standards of the parents as well as society. Development ensures that the child's full potential in all functional areas is promoted (Hoghughi, 1997:24; Jehu, 1990:17; Erooga and Masson, 1999:6-7).

3.5.5 Psychological disturbances of the victim

Children who are emotionally and physically abused could develop psychological disturbances, as discussed in Chapter 2. The child ultimately becomes emotionally more unresponsive, unstable, insecure and hostile (Barnes-September et al, 1999:40). Generally, when these children are depressed and unhappy they feel rejected and are more vulnerable to sexual abuse.

3.5.6 The influence of silence and secrecy

The family is also viewed by society as private and public interferences should be minimal. This contributes to sexual molestation because the crime can continue without any interference. Because the victims experience feelings of shame after

being sexually molested, they keep the information to themselves. The continuation of this silence contributes to sexual abuse.

Molestation is also often seen as a taboo topic that nobody discusses. Victims feel ashamed and are scared to talk about what has happened to them. There is still a stigma attached to molestation, which communicates a negative message to the victim about herself. Victims often feel evil, worthless and guilty.

3.5.7 Lack of sex education for the victim

Finkelhor (1979:127) maintains that children often do not receive sex education and the younger children are more vulnerable to experiment sexually because they have not received sexual boundaries and learned how to control their sexual impulses.

3.5.8 Overcrowded conditions in the family

Finkelhor (1979:127) argues that sexual molestation often takes place in overcrowded conditions. He concludes that it is not the overcrowding, but rather the increase in extraneous people living in the household for example, the grandparents, cousins and boarders. These people have a more distant connection to the family and might be less inhibited from taking sexual liberties. Girls from large families with many brothers, are vulnerable due to the possible greater age span between the brothers and sisters. The brothers often have friends who could make sexual advances to their young sisters.

3.5.9 Legalisation of abortion

Matsaung in Barnes-September et al (1999:61) argues that the legalisation of abortion contributes to the increase of molestation and sexual exploitation of children. The perpetrator is more likely to engage in sexual activities with a child when the victim can have an abortion should she fall pregnant. The researcher was informed by a medical doctor that she has performed four abortions on a child who has fallen pregnant after being sexually molested by her father. The perpetrator is a wealthy man from a neighbouring country and therefore cannot be prosecuted in South Africa.

3.5.10 Drug abuse in the family

Parents who abuse drugs are often not capable of taking care of their children. When these children are not adequately supervised and protected, they are easy targets for perpetrators. Faller (1989:341) maintains that drugs can increase the sexual drive of the perpetrator and cause a lack of inhibitions, which increase the risk of sexual molestation in the family. When drugs are given to the victim it can cause loss of memory and of resistance. One of the clients of the researcher has been given the "date rape" pill before being sexually molested by her father. Although there was blood and semen as evidence of sexual assault, the victim could not recall what has happened after her father had given her a pill to "make her sleep better".

3.5.11 Runaway children

Runaway children are frequently escaping from sexual abuse at home, and too often find selling sex as their only means of survival on the streets. These children have nowhere to go, and fall victim to a life of crime, drug abuse and sex work. These young, naive and desperate children become easy prey to recruiters who use deception, force and promises of high pay to lure the youth into the sex industry. Lacking skills and education, their chance of obtaining employment within the formal sector are limited, and they are forced to remain in the sex industry. When these victims grow up and have children of their own, they lack parenting skills and their children become victims of molestation and later victims of the sex industry.

3.5.12 Cycle of sexual molestation

Erooga and Masson (1999), Gil and Johnson (1993) and Laws (1989) agree that sexual perpetrators have often been sexually abused as children. These perpetrators become confused about sexual norms and moralities as well as their sexual identity which lead them to re-enact their sexual abuse on a victim. Their sexual behaviour is a direct response to their own sexual abuse. This cycle of sexual molestation is carried through the generations.

3.5.13 Sexualised home environment

Finkelhor (1979) and Jehu (1990) maintain that a home, which is over sexualised, can contribute to sexual molestation. Excessive focus on sexuality emerges as a result of exposure to inappropriately explicit sexual information, direct or indirect

sexual experiences and poor parental guidance or the lack thereof. Sexuality is given distorted importance and meaning and used as a strategy for manipulating others into sexual activities. In these homes there are no boundaries to prevent children from being molested. Explicit sexual information arouses this perpetrator who then entices the victim into sexual molestation.

3.5.14 Male supremacy in the family

Finkelhor (1979:29), Erooga and Masson (1999:3) and Jehu (1990:18) highlight the fact that male supremacy is a precursor to sexual abuse. Jehu (1990:18) states that mothers in a patriarchal family tend to be over dependent, subservient, oppressed and depressed. They have limited social skills, are unassertive and have a low self-esteem, which cause them to feel disempowered and unable to protect their children. In this patriarchal system men believe they have the right to sexually abuse any female child because they have physical and economic power over her.

Feldman et al (1991:32) and Leder (1999:272) list other social factors, which contribute to possible sexual abuse. These factors include a young mother, a mother with a boyfriend, teenage males living in the home, and a child in foster care. The mother's boyfriend and foster families could possibly see themselves as not being related to the victim, and they are less protective and thereby could easily justify sexual relationships with the victim. A mother with a boyfriend could spend less time with her children and become less supportive of her children's needs. Due to the lack of parental care they can become easy targets for sexual abuse because their emotional needs are not met.

3.5.15 HIV/AIDS-related myths

Barnes-September et al (1999:48) maintains that many black men believe young children are free from HIV/AIDS, with the result that they molest young children as an outlet for their sexual frustration. Other black African men who are HIV positive believe that having sex with a minor can cure them from this deadly disease.

3.6 THE INFLUENCE OF THE MEDIA ON CHILD SEXUALITY

Research by Shelov, Bar-on, Beard, Hogan, Holroyed, Pentice, Sherry and Strasburger (1999) and Strasburger and Donnerstein (1999) indicate that in a first world country, the media has the most important and unrecognised influence on the sexual behaviour of young children. In South Africa almost every family, whether they live in an informal settlement or a house, has a television set. In many homes there are two television sets, one allocated to the children and the other to the parents, and some have a television set in every bedroom.

During one week, the average American adolescent will have spent 55 hours watching television and equal time listening to the radio. The media often associates sex with excitement, danger, violence or humour, but the dangers of unprotected intercourse is never emphasized. Television has a powerful influence on the sexual attitudes, values and beliefs of teenagers. Television reinforces the suggestion that non-marital intercourse is regarded as acceptable behaviour, while abstinence among teenagers is rarely portrayed in a positive way.

Studies by Shelov et al (1995) indicate that American teenagers watch 14 000 sexual references per year on television. Between 1975 and 1988, television programmes containing scenes of sexual behaviour viewed during family hour have doubled and those containing suggestive scenes increased by four times. Shelov et al (1995) further reveal that programmes of Music Television Network involve 25 % containing sexual imagery, 50 % portray violence and 80 % portray violence against women. The findings from their study indicated that teenagers have access to movies with sexual contents on cable television, in theatres and on home videos and that the sexual content of soap operas has more than doubled since 1980. More alarming is that in soap operas, sex between unmarried partners occurs 24 times more as compared to sex between married partners. Even the advertising media uses sex to sell products (Shelov et al 1995:298). This study further concluded that more than 50% of 15 to 16 year old teenagers watch R-rated movies on television and 92% of children have seen or read the "Playboy" or "Playgirl" by the age of 15. Sixty one percent of teenagers reported, "surfing the Net" and 14 % reported seeing programmes they did not want their parents to know about. Strasburger and Donnerstein (1999) report that family hour of prime time television contains more than 8 sexual incidents per hour and one third of family hour shows contain sexual references and vulgar language. The Internet also presents easy access to hard-core pornography to everybody, regardless of their age.

In South Africa there is no research available on how much casual permissiveness, promiscuity, erotica and pornography is shown on television. By paging through the television programme guide it is clear that many of these programmes contain

scenes of nudity, violence and sex. Even educational programmes, such as *Scamto*, which was developed to sex educate teenagers, reflect youth sexual permissiveness instead of teenage abstinence from sex.

Strasburger and Donnerstein (1999) refer to 5 studies demonstrating the connection between television programmes with high sexual content and early sexual behaviours. One of these studies was done by the National Survey of Children in America, and revealed that boys who watch more than 55 hours of television per week had the highest prevalence of sexual intercourse. The study also indicated that children who were exposed to soap operas and talk shows had beliefs consistent with what they are watching. The beliefs, which the media facilitated, were that married people often cheat on their husbands or wives and that most of their friends have sex. Strasburger and Donnerstein (1999) refer to a study that concluded that pregnant young girls watch more soap operas compared to their non-pregnant peers. The study further revealed that junior high-school girls who watch television programmes with a sexual content, began having sexual intercourse earlier compared to their peers.

The researcher is not aware of any studies on television and sex in South Africa, but local television programmes are imported from America and many of these television programmes referred to in the survey, are currently showing on South African television.

3.7 THE HOME ENVIRONMENT AND THE RECOVERY AFTER MOLESTATION

Paradise et al (1994) studied the psychological impact of sexual abuse on victims. The study had three objectives: in what ways and to what extent sexually abused children differed in behaviour and school performance immediately after their disclosure; to detail changes, if any, that developed in the sexually abused children; and to identify initial characteristics among sexually abused children that were associated with succeeding problematic behaviour. They studied 154 children who recently disclosed sexual abuse with a control group of demographically similar children not known to have been sexually molested. At a follow-up 6 months later, children whose emotional difficulties persisted, had negative psychosocial circumstances. They concluded that psychiatric symptoms of the abused children's mothers may have adversely affected recovery. Psychosocial circumstances such as lower maternal educational attainment, poorer maternal psychiatric status, lower family integration, problematic family function and unsupportive families influenced recovery adversely. The study further suggested that pre-existing, long-standing adverse psychosocial circumstances contribute to the problematic behaviour and academic performance of sexually abused children. These findings indicated that it is the pre-existing adverse psychosocial circumstances, rather than the abuse, that determine the nature of their functional outcomes. Paradise et al (1994) suggest that especially young children with psychologically healthy mothers or well-functioning families may escape the negative consequences of sexual abuse (Paradise et al, 1994).

3.8 DISCLOSURE OF MOLESTATION

In South Africa the extend of sexual molestation and the actual number of children who are sexually exploited are inaccurate due to the lack of research. Statistics from some government departments, Child Protection Units and individual members of civil society indicate that the numbers are increasing but warn that the problem is much larger than the numbers reflect (Barnes-September et al, 1999).

Feldman & Feldman, Goodman, McGrath, Pless, Corsini and Bennet (1991:29) analysed the evidence to establish whether sexual abuse was on the increase in America. According to Fledman et al (1991) and McCann, Voris and Simon (1992:307), the reporting of child sexual abuse has increased from 12 % to 28 % between 1940 and 1978, but an overview of available literature of more than 400 articles show that there has been no increase in the prevalence of child sexual abuse. It would appear that the increase in the reporting of sexual abuse is due to the social climate, poor sampling techniques, inappropriate research designs, intensive probing as well as the changes in legislation rather than a true increase in prevalence (Feldman et al, 1991). There has been an increase in the rate of disclosure of sexual abuse while the actual occurrence of sexual abuse have remained steady at about 12 % since 1940. Feldman et al (1991) maintain that the legal imperative to report child sexual abuse as well as the attitudinal change of society toward children and women, account for the increase in the report of child sexual abuse.

According to Hoghughi (1997) there are many reasons why sexual abuse is not reported. Many homes in which sexual abuse occur are so chaotic and disorganised

that sexual abuse goes unnoticed. People are suspicious of police and public intervention and they assume that the public and legal systems will not protect the victim. Parents also underplay the importance of sexual abuse. Parents and officials hope that the child perpetrator will "grow out of" molesting behaviour. Many child victims are unable to articulate the abuse and they fear the reactions of their parents. Victims are also concerned about the effect of the disclosure on their reputation amongst their peers. Parents and victims are uncertain about the procedure to follow when reporting sexual abuse and they fear the outcome of the disclosure (Hoghugh, 1997:11). Severe anxiety about the consequences of reporting sexual abuse restrain family members from taking the necessary action. The breadwinner in the family is often the perpetrator and the consequences to the family in having him arrested, restrict the non-abusing parent from reporting him.

Leder et al (1999:273) report that many medical professionals in America believe that they are not adequately equipped to address suspected sexual abuse for a number of reasons. The barriers are: lack of training to identify suspected sexual abuse; lack of time for further investigation; loss of alliance with the family; discomfort discussing sexual issues with the patient; fear and uncertainty about the outcome of the investigation; lack of appropriate referral services; belief that the child protective services are inadequate and a concern regarding false accusations. The researcher has found that parents and schools are reluctant to report sexual abuse for the same reasons as above. Ignorance regarding the procedure involved in reporting sexual abuse, is a further barrier.

Another reason given for not reporting sexual abuse, according to Feldman et al (1991:29), is the inability to agree to the definition of sexual molestation. There are many types of sexual abuse ranging from inappropriate language to sexual intercourse. According to Lewis (1999:89), sexual abuse include the following: exhibitionism occurs when an adult exposes his genitals to a child; voyeurism takes place when an adult shows an inappropriate sexual interest in observing children; verbal abuse occurs when adults become sexually aroused through sexual talk that shocks the child; sexual touching takes place when adults fondle or touch breasts or genitals of children; oral sex occur when the penis or the vagina is stimulated with the mouth; vaginal and anal penetration occur when a penis, fingers or any other object penetrate the vagina or anus; child prostitution and child sex rings involve children in sexual activities with adults; child pornography occurs when literature or media with explicit descriptions or exhibitions of children in sexual activity is produced with the intent to sexually arouse.

Peluso and Putnam (1996:51) warn that sexual abuse by female perpetrators is relatively common. When young males report unwanted sex with females, caregivers may fail to respond with sensitivity to the trauma. Clinicians may fail to recognise sexual abuse by female perpetrators because there is relatively little written about it. The following beliefs may be responsible for not recognising sexual abuse by female perpetrators: there is the presumption that boys are rarely victims of sexual abuse; most people believe that the perpetrator is always a man; the belief that sexual encounters between a young man and a female are always experienced as enjoyable by the male, and sexual arousal in a male indicates a consent to participate in the sexual activity. Many young males have been coerced into sexual

activities with older women, but will often deny that it was sexual abuse. Sexually coercive acts by women are often ignored because it seldom involves physical force.

3.9 REPORTING SEXUAL MOLESTATION

Most cases of sexual abuse do not have physical evidence of injury, sexually transmitted diseases or seminal fluid. Successful prosecution depends on the quality of the history obtained of the victim and the ability of the child to reveal her experience effectively. Physical evidence is not essential for conviction. Medical testimony may help to interpret why physical evidence is not available.

After the sexual abuse has been reported to the police, a J88 is completed by the District Surgeon. This document states that permission is given for the child to be medically examined and any evidence to be taken. If the parent is the suspected perpetrator, the commanding officer can give permission for the medical evaluation to be performed. Evidence that is gathered is sealed and handed over to the investigating officer.

An identification parade will take place when no other substantial evidence is available and if the victim can definitely identify the perpetrator. The victim verbally identifies the perpetrator through a one-way glass.

After the police have completed their investigation, the case is handed over to the Senior Public Prosecutor of the Office of the Attorney General. The Senior Public

Prosecutor decides if the case is strong enough to go to court. From this point onward, a prosecutor handles the case.

Once the assumed perpetrator is arrested and charged, he is permitted to apply for bail. A magistrate will decide to what degree the perpetrator poses a threat to the child and family. To apply for bail is the right of the accused. A representative from the community forum can make a representation to the magistrate against the bail. This person must justify why the accused is a threat to the community.

The court case may be postponed in order to wait for medical investigations to be completed and to take statements from witnesses. The court case may be postponed a few times before it is finalised. It could take a few years to be finalised, which makes it very difficult for the child. When the investigation is completed and the case is ready to go on trial, witnesses are subpoenaed and a date is set for the trial. The accused is entitled to legal representation, which is provided by the state if it is affordable. There are accused perpetrators who never go to trial due to the lack of state funding. This situation can cause victims to become despondent to report sexual abuse.

Sexual molestation is a crime against the state, therefore the child victim is a witness in the state's case against the assumed perpetrator. The lawyer who is the state prosecutor, will assist in preparing the evidence. The state prosecutor will present the case to the court and must prove the guilt of the assumed perpetrator beyond all reasonable doubt (Lewis, 1999:136-147).

3.10 SUMMARY

In this chapter the researcher has discussed a continuum of home environments and family dynamics, which influence the sexual development of children. From the discussion it is clear that the home environment plays a fundamental role in the normal and healthy sexual development of the pre-school child. Creating a safe home environment for the pre-school child limits potentially abusive situations and facilitates disclosure of sexual abuse.

In chapter 4 the handling of sex education at home and at school is investigated and guidelines for the formulation of a parent orientated sex education programme for pre-school children are discussed.

CHAPTER 4

Parent orientated sex-education for pre-school children

4.1 INTRODUCTION

Schutte (2000:22) maintains that pre-school (5 to 6 years old) children can understand and internalise the concepts that are part of a sexual abuse prevention programme. Sex education programmes for pre-school children should include the training of teachers and parents on creating a safer environment for pre-school children as well as assisting parents in sex educating their pre-school children. Sex education for pre-school children should be available on an ongoing basis in order to assist the different systems when they need education. Schutte (2000:9) further maintains that it is important for pre-schools to reinforce prevention of molestation programmes.

In this chapter the researcher will discuss five separate issues regarding sex education: the need for parents to sex educate their children; the parental attitudes regarding sex education for pre-school children; the value of school based sex education in pre-schools; sexual socialisation of the pre-school child and the pre-

school child's perception of sex. Guidelines for the composing of a parent orientated sex education and safety programme for pre-schools will be presented.

4.2 THE NEED FOR PRE-SCHOOL CHILDREN TO BE SEX EDUCATED

Children, as young as pre-schoolers, are sex educated every day. They hear about sexuality through friends; they experience it through exploration and abuse; they read about sexuality on bathroom walls; they observe it through advertising as a way to sell products; they hear about sexuality set to music in popular songs and they see or hear about it through the media, for example, films, television, radio, newspapers and magazines. In this kind of social environment in which children are raised, parents do not have a choice about whether pre-school children should be informed about sex, their only choice is about whether they will participate in sex educating their children. Parents should take an active part in providing sex education to their pre-school children so that they can demonstrate respectful, appropriate and responsible sexual attitudes and behaviours, as well as being informed and skilled to protect themselves against sexual victimisation within and outside their peer group.

The following reasons contribute to the need for parents to sex educate their pre-school children.

4.2.1 Prevalence of sexual abuse

Authors who have studied the aetiology and consequences of molestation, agree that it is a growing problem and parents need to educate their pre-school children about

sex to protect themselves (Erooga and Masson, 1999; Finkelhor, 1979; Gil and Johnson, 1993; Gilbert, 1988; Hoghughi, 1997; Jehu, 1990; Lewis, 1999; Wardle, 1995). Parents are misinformed by assuming pre-school children are molested by strangers and molestation does not take place in their own homes or at schools. Sexual molestation takes place everywhere, ranging from schools, day-care centres, parks and homes.

Lewis (1999:101) conducted a study during 1996 at a South African Trauma Clinic. This study revealed that half of the children in the study were sexually victimised on the school grounds or on their way home and twenty percent were sexually victimised by the next-door neighbour. According to Lewis (1999), American statistics show that one out of three girls and one out of seven boys are molested. In South Africa the actual number of child sexual abuse cases are unknown, because sexual offences are under reported. According to Supt. Jan Swart, the head of the Child Protection Unit of the Western Cape, this is because many children are abused by the person who feeds them (Die Burger, 14 June 2000). The National Institute for Crime Prevention and Rehabilitation of Offenders estimates that only one in twenty sexual assaults are reported in South Africa (Lewis, 1999:98-101). These statistics emphasise the need to take action to protect children by educating pre-school and older children about sex and how to protect themselves against molestation.

Kelley (1990) noted that sexual abuse of children in day care centres has increased and that the problem has received considerable attention. Kelley (1990) reviewed available research findings on the different types of abuse known to occur in day care centres in America. Her research findings are based on the work of Finkelhor (1988)

and Kelley (1989). According to her research, abuse in these settings differs from interfamilial sexual abuse. The differences in the dynamics are in the young age of the victim, the involvement of multiple victims and multiple perpetrators, both males and females as perpetrators, use of exceptional threats as well as rituals. These sexual acts range from fondling of the genitals, oral copulation, digital penetration of the vagina and rectum to vaginal and rectal intercourse. Children are told that objects entering their genitals had magical powers while others are told a magic wand is entering them. Forcing children to sexually abuse other children can cause children to perceive themselves as perpetrators, which increases the feeling of guilt and contribute to secrecy (Kelley, 1990).

The researcher agrees with Kelley (1990) that pre-school children are often threatened by staff members at school to keep molestation a secret. The researcher has found that the caretakers often help the pre-school children to undress for their extra mural activities such as ballet, ball skills or swimming. The pre-school children are often molested when they are in the nude in a bathroom or a separate room while assisted by caretakers to get dressed in leotards or swimming costumes. Occasionally, the molestation would take place while the pre-school children are sitting on the laps of caretakers while waiting for their ballet or swimming teacher. These pre-school children are vulnerable because adult caretakers assist them while they are in the nude, in a closed bathroom and at the same time, they lack sex education and boundaries to protect themselves. Research by Kelley (1990) has also indicated that threats to physically harm the children were widely reported. Threats to the children and their family, as well as threats to loss of love or separation from family members, were used to silence a victim. These threats involved frightening

monsters, demons, snakes and spiders and in some cases, small animals were killed in front of the victims while being warned that the same will happen to them if they tell. In some cases children were drugged by “magic medicine”. Finkelhor (1988), Kelley (1989) agree that ritualistic abuse of children has been reported widely at day-care centres. This disturbing type of abuse involves adults dressed in costumes and masks, threats with supernatural powers, sacrificing of animals and ingestion of blood, faeces and urine. Perpetrators are often family members of the staff and are strangers to these children. When children supply unfamiliar names to investigators during questioning, it causes disbelief. Children are transported to unfamiliar sites and therefore are unable to accurately identify these sites. Kelley (1993) reports that female perpetrators were found to be more likely than males to force children into sexual acts with each other. According to studies by Finkelhor (1979) and Kelley (1990) disclosure is often delayed, because most of the victims revealed their abuse to their parents only after parents had noticed suspicious behaviour or symptoms and only then questioned the child. Although the researcher is aware of molestation on school premises, she has not found any data available on ritualistic sexual abuse in day care centres in South Africa.

4.2.2 Sexual norms in society

In an ever changing society, a facet which seems to be changing with incredible speed, is sexual norms. During the last two decades, the researcher has noticed an acceptance of pornography, erotic television programmes and articles in family magazines, pre-marital sex, cohabitation between couples, divorce, homosexuality and even abortions. These tendencies were against South African norms a

generation ago. Many authors agree that one norm has remained unchanged and that is the reluctance amongst parents to sex educate their children (Allensworth, 1992:22; Rozema, 1982:3; Warren and Neer, 1986:86). This reluctance to sex educate children, together with a decay of moral values, contribute to molestation and problematic sexual behaviour amongst pre-school and young children. The need for pre-school sex education has increased due to the change of sexual norms of society.

Wardle (1995) also warns that children of different cultures with different sexual norms are brought together in childcare centres and this could contribute to the child's confusion about sexual norms. The researcher is of the opinion that this problem is more prominent in South Africa where children in pre-schools come from many different cultures and backgrounds. These children have different value systems and different degrees of exposure to, experimentation with, and knowledge about sex. Being together at school, children are exposed to different levels of sex education and exploration with sex, which are shared and practised amongst friends. Wardle (1995) adds that childcare professionals respond in different ways to children's sexual behaviour because there is little agreement on how to intervene appropriately and how to support healthy sexual development. Wardle (1995) suggests that there should be an agreement on how to intervene appropriately and how to support healthy sexual development. As a result of different messages about sex at schools, Wardle (1995) suggests that pre-school children should receive sex education at home. The researcher suggests that student teachers should be educated on normal child sexual behaviour as well as intervention to inappropriate

sexual behaviour. She agrees with Wardle (1995) that sex education should initially come from home, but should be reinforced in schools within an unanimous syllabus.

4.2.3 Sex education by peers and the media

There is a general agreement amongst those who have studied the influence of sex education on children (Allensworth, 1992; Calderone, 1982; Warren and Neer, 1986), that if parents do not talk to their pre-school children about sex, they will be informed by their peers or through the media. Warren and Neer (1986:103) noted that parental sex education reduces pre-school children's dependency on sources of information outside the home. Allensworth (1992:22) goes further by warning parents that they indirectly sex educate their children, even if they do not acknowledge it. He believes that parents are their child's first sex educators and they communicate a message about sex even if they choose to avoid discussing the subject. Avoiding discussions about sex, or the tone of sexual discussions, reflects a message about sex to the child. The tone for sexual discussion is set with the choice of the terms for the sexual anatomy. For example, when parents use slang to refer to genitals, they reflect a message of embarrassment or confusion to their children. When parents demonstrate love and affection to each other, it serves as a role model on how to show affection (Allensworth, 1992:22).

While teaching sex education at schools, the researcher has observed the negative impressions of children whose parents avoid talking about sex. These impressions were the result of indirect messages conveyed by parents to children about sex. Rozema (1983:9) agrees that children are misinformed because they overhear adult

conversations and draw inaccurate inferences about human sexuality. While facilitating sex education at schools, the researcher came across some children who believe that women fall pregnant from kissing a man or that a man plants a seed in a woman's tummy by using a spade. Children avoid discussing sex with their parents because they feel that their parents will be shocked by their questions, or that sex is a secret topic only allowed to be discussed by adults, or they see their parents as non-sexual beings and uninformed about sex.

Research by Lu (1994:6) indicates that most children learn about sexuality through reading, joking or interacting with peers, rather than from their parents. This results in children regarding sex as bad and secretive and they will grow up unable to talk about sexual needs and feelings. During sex education classes presented by the researcher, the learners admitted that they do not talk to their parents about sex, because their parents avoid the topic. Children are accustomed to parents initiating important issues and expect their parents to initiate sex education. Parents need to take responsibility for initiating sex education to their pre-school children to prevent them from growing up believing it is a secretive matter.

4.2.4 Fictitious sexual explanations

Calderone (1982:29) maintains that a lack of parental sex education results in the retardation of children's sexual thinking. This leads to the usage of fictitious sexual explanations by children and a need to formulate suitable and logical explanations for sexual phenomena in the absence of adequate information. Rozema (1983:9) explains that some parents give pre-school children incorrect explanations regarding

human sexuality. Thus children are told and subsequently believe, that the stork brings the baby, babies come from the doctor's bag, or are bought in a store or given by a god.

Parents have shared with the researcher the views of their children on where babies come from. These explanations vary from babies being bought in a shop to being brought by the stork or hatched after their mother laid an egg. In trying to understand the complexities of their world, pre-school children reveal as great a curiosity and interest in learning about sex and reproduction, as in learning about nature. When they ask questions about reproduction, parents have a responsibility to satisfy this curiosity with the correct information.

Lu (1994) emphasises the need to sex educate pre-school children, because it will eliminate the "forbidden" aspect of sex, and limit the urge to gain more information from friends. The first impression of sex is a lasting impression and parents have to decide whether they or society is responsible to sex-educate their children. When children are not allowed to ask questions about sex, or when they are ridiculed because of their questions, they are encouraged to turn to their peers, who are often not equipped with correct information, for answers. Experts agree that when children's curiosity about sex is satisfied by parental sex education, they are less likely to turn to their ill-informed friends (Henscke, 1984; Lu, 1994; Rozema, 1983:9).

Sex education also includes teaching pre-school children the correct terms for genitals as well as explaining the functions of these organs. Calderone (1982:29) warns that in failing to give correct names to these organs and to validate their

function for the present and the future, parents force their children to live in sexual oblivion during the first years of their lives. She warns that children simply satisfy their sexual interests through secret sexual activities which could have been avoided by sex educating pre-school children

According to Polulech and Nuttall (1992:2) children are bombarded with negative messages and values about sex and social relationships by enticing and suggestive images in the media. In South Africa, television programmes, which offend family values and social norms, are often broadcast during a time slot that is normally allocated to the younger viewers. This information often misinforms the children and they struggle to understand the conflicting messages they obtain from parents, friends, the school and the media. As a result, they may develop unhealthy attitudes towards sex (Polulech and Nuttall, 1988:2). Parental sex education will reflect the values of the family as compared to the indecent perspective the media or friends often convey to pre-school children.

4.2.5 Increasing sexual exploration

Polulech and Nuttall (1992:22) explain that many parents believe that their children do not have to be sex educated, because they will gain enough information through personal experiences. These parents do not realise that personal experiences could include inappropriate and advanced sexual exploration or even being molested by their peers or an adult. Polulech and Nuttall (1992) encourage parents to sex educate their pre-school children and warn that avoiding discussions about sex, could increase children's misconception about sex, as well as increasing sexual

exploration amongst friends. Allensworth (1992:22) agrees that sexual ignorance leads to sexual exploration and his research indicates that children who have received parental sex education, have more age appropriate sexual behaviours. Warren and Neer (1986:103) take it further by stating that children who received parental sex education, are less promiscuous. During consultation with molested children and children with problematic sexual behaviour, the researcher has found that none of these children have received parental sex education, and therefore agrees with the aforementioned authors that sexual ignorance leads to sexual exploration and promiscuous sexual behaviour amongst pre-school children.

The researcher has counselled with many pre-school children who have been molested by their peers or caretakers on the school premises. During assessment, it was apparent that these victims are ignorant regarding sex and have received no boundaries for sexual games. The pre-school children who have received sex education, were able to stop the inappropriate sexual games which could have resulted in molestation or abusive sexual play amongst peers. Pre-school children who have not received sex education are often enticed into sexual games by their friends. Parental sex education could have prevented some of these victims from becoming involved in inappropriate and abusive sexual games. Many abused children re-enact what has happened to them on innocent and ignorant victims in their peer group. The researcher agrees with Gil and Johnson (1993) that molestation is the most common reason for problematic sexual behaviour amongst children. The occurrence of problematic sexual behaviour is related to the degree of molestation or exposure of children to sex. Most often schools do not deal appropriately with the occurrence of problematic sexual behaviour amongst children.

Gil and Johnson (1993:1) warn that parents and professionals too often minimise dangerous and problematic sexual behaviour between children. Inappropriate sexual play or aggressive and hurtful sexual play is ignored, dismissed or punished. Hoghughi (1997) writes that this attitude has resulted in the increase of molestation and problematic sexual behaviour because neither child molester nor child victim receives the necessary therapeutic intervention. The researcher has also found that most of the children receiving therapy, have been victims of other children who have been acting out their sexual experiences. The victim becomes a perpetrator by acting out the sexual abuse on another peer. The cycle of sexual abuse increases because pre-school children do not have sexual boundaries or the knowledge to protect themselves, and subsequently re-enact their abuse on peers. This also increases the cycle of problematic sexual behaviour in the peer group.

Lu (1994:9) has noticed that parents are inclined to interpret children's sexual behaviours from an adult's perspective and therefore do not encourage children to explore sexually or to be interested in sexual issues. These parents are often shocked by their children's genital play or masturbation. These negative reactions from parents can hinder the formation of affectionate relations between children and their parents, which is more destructive than the early body explorations by the child (Lu, 1994:9). The researcher agrees that parents respond with shock to their children's sexual exploration and questions, due to their ignorance regarding the normal sexual behaviour of pre-school children. Information regarding normal child sexual behaviour should be conveyed to parents in order to help them understand their children and to assist them in sex educating their pre-school children. Parents informing their pre-school children about appropriate and inappropriate sexual

explorations, will give them sexual boundaries for their exploration and could minimise inappropriate sexual play.

Calderone (1982:29) maintains that sex education should include teaching pre-school children boundaries for privacy, norms and appropriate sexual exploration. All boundaries, except sexual boundaries, are given to children by parents and the researcher agrees that without these important guidelines, children do not know what is expected of them in terms of sexual behaviour. Sex education of pre-school children will reinforce body privacy and boundaries for sexual exploration.

Gil and Johnson (1993) and Rozema (1983:13) warned that parents have to sex educate their pre-school children and realise that sexual ignorance contributes to molestation and problematic sexual behaviour amongst peers. From this discussion the researcher assumes that both the lack of sex education and the lack of teaching pre-school children sexual boundaries for sexual games, contribute to pre-school children being molested and revealing problematic sexual behaviours. If parents do not commence to sex educate pre-school children, the norm to avoid sex education will continue and the cycle of molestation and pre-school children re-enacting their sexual abuse on their peers, will persist.

4.3 PARENTAL ATTITUDES TO SEX EDUCATION FOR PRE-SCHOOL CHILDREN

Baldwin and Bauer (1994:162) point out that the sexual nature and development of children is a contentious and taboo topic in most societies. They argue that most

parents assume that sexual education is unimportant or irrelevant for children until the onset of puberty. When parents believe it is time to sex educate their children, many are unable to talk to their children about issues of sexuality, intimacy, values or even basic reproductive processes.

4.3.1 Parental indecision to sex educate pre-school children

The following reasons may contribute to a parent's discomfort and avoidance about the subject of sex which could increase a child's sense of confusion and anxiety regarding sex.

4.3.1.1 *Ignorance of the parent*

Lu (1994:25) asserts that most children are interested in sex and reproduction at the age of five, despite the fact that parents feel that pre-school children are too young to discuss sex or to understand human reproduction. Rozema (1983:5) agrees with Lu (1994:25) that unfortunately pre-school children are often considered too immature to understand what sex is and are ignored when they express sexual issues. Rozema (1983:5) further highlights the inconsistency in parent's evaluation of the comprehension level of their children. These parents maintain that their children cannot comprehend information regarding sex, but give their children complicated answers to questions that are less threatening such as explaining the concept of gravity. Rozema (1983) argues that this parental ignorance is the barrier to effective communication between parents and children. The researcher has observed that many parents expect their children to understand complicated tasks and concepts,

but they are convinced that their children are not capable of understanding the biological process of sex. The researcher assumes that it is the parents who want to delay sex education because they feel uncomfortable to talk to their children about sex. The researcher is of the opinion that it is important so sex-educate children even if they do not ask questions about sex. When parents do not discuss sexual matters, they convey the message that sex is something they do not want to talk about. These children will not have the courage to ask questions about sex and will turn to their peers or the media for answers.

4.3.1.2 Discomfort of the parent

Friedrich et al (1991) maintain that parents feel uncomfortable and incompetent to talk about reproduction and other sex-related topics to children due to their own emotional discomfort. Authors agree that these fears may be based on the parent's own discomfort with a topic which was not discussed freely when they were young (Henscke, 1984; Polulech and Nuttall, 1988:6). Henscke (1984:3) argues that when parents are uncomfortable with their own sexuality, they dismiss questions about sex and children become reluctant to ask questions about sex. He goes further by noting that parents also subtly express a feeling of awkwardness about sex by not showing affection towards each other in front of their children. As a result, children find it difficult to imagine that their parents have a sexual relationship (Henscke, 1994:3). Rozema (1983:5) warns that if both children and parents deny each other's sexuality, they do have little to talk about regarding sex. Some parents fear that discussing sex with their children will give children insight into their personal sex lives, while others believe that talking about sexuality might lead children into sexual

experiments. Many experts agree that what parents do not realise, is that it is ignorance, not knowledge, that stimulates inappropriate sexual behaviour and encourages sexual experimentation (Gil and Johnson, 1993; Henscke, 1984:4; Lu, 1994:8; Polulech and Nuttall, 1988:2; Rozema, 1983:12).

4.3.1.3 *Religious and societal norms*

Rozema (1983) recognizes the conventional norm passed down through generations that sexuality should not be talked about. This norm usually starts when young children are not allowed to refer to certain body parts in the presence of company. Soon sexuality falls into the category of topics not freely discussed in any context in the family. Rozema (1993) argues that the norm to avoid discussions about sex, is endorsed by religions and religious authors who place sexuality in a distorted or negative perspective. One of these distortions is the false dichotomy that the body is totally evil and the soul totally good. The individual is encouraged to condemn bodily pleasures and desires, focussing primarily on spiritual matters. Rozema (1983:7) has noticed that it is in homes where formal religion plays a major role, that sex education is slanted in the direction of prohibitions, threats and moral advice. She argues that many sex education books have moral overtones focusing more on moral values while neglecting to explain the necessary information regarding sex. Rozema (1983:7) refers to the use of language as a deterrent to effective communication regarding sexual talk between parents and children. There are many negative connotations to words such as vagina, penis, masturbation and sex which cause parents to feel intensely uneasy when using these words. Using euphemisms like

“fanny”, “winkie” “fiddle” and “making a baby” to refer to sexual words only emphasise the unwritten norms that sex is not talked about openly (Rozema, 1983:9).

4.3.1.4 *Lack of knowledge*

Many parents do not know how to convey the message about sex to their children. They are confused about what to say and how much to say. Parents who do not have accurate knowledge about human sexuality, often mislabel body organs and functions. As a result, children are confused, misled and have improper thoughts about human physical attributes. When children learn the correct information from others, they may distrust their parents as a reliable source (Lu, 1994:9; Polulech and Nuttall, 1988:3).

A study done by Lu (1994) showed that the majority of 1400 parents questioned, did not have enough accurate knowledge and confidence to sex educate their pre-school children. The findings of Baldwin and Bauer (1994:163) correlate with Lu (1994:25) which indicate that most parents themselves received inadequate sex education and, therefore, felt unqualified at communicating sexual information to their children. The researcher has found that parents have not been taught to discuss sex openly and have often received incorrect information. She agrees with Lu (1994:27) and Allensworth (1992:22) that some parents have the misconception that there is a correlation between receiving sex education and sexual experimentation. The researcher has also found that most parents feel that sex education is not desirable for pre-school children. Parents fear their pre-school children might lose their innocence due to their knowledge about sex. Other parents are concerned that their

pre-school children might be shocked with details about sex or that their pre-school children might feel uncomfortable knowing that their parents are having sex. Some parents do not want to inform their pre-school children about molestation, because they fear it will frighten the pre-school children or create mistrust in them after disclosing that parents could also molest their own children. Many parents do not sex educate their children because they lack a role model from their own parents on how to sex educate pre-school children. Some parents justify avoiding sex educating their pre-school children by arguing that they were waiting for the first question about sex from the child.

Allensworth (1992:22) refers to a survey that revealed that parents hesitate to speak to their children about issues involving sexuality. According to his research, less than 20% of parents in Great Britain sex educate their pre-school children. The research also revealed that while most mothers discuss menstruation with their daughters, less than 5% explain the relationship between pregnancy and menstruation. Research by Baldwin and Bauer (1994:165) indicate that between 85% and 95% of parents in the United States of America had never discussed any elements of sexual behaviour with their children. Walters and Walters (1993:9) agree, but go further by stating that mothers are more likely to discuss menstruation with their daughters because it is considered as a practical issue of personal hygiene and not as a sexual topic. They argue that some parents with young children may provide the children with picture books on sex education that require children to generalise from animals to humans. When the children grow old enough to relate animal sexual behaviour with human sexual behaviour, the communication about sex ceases (Walters and Walters, 1983:8). The researcher received feedback from parents that they feel more

comfortable providing sex education while using animals as examples. The researcher assumes that this is because most parents still feel embarrassed about their own sexuality. They externalise sexual behaviour using animals as examples, because they find it difficult to admit to their children that humans have sex.

A British survey (Allensworth, 1992:22) found that 20% of parents want guidance in providing sex education to their children. Many parents want to talk to their children about sexuality and share their values and beliefs about sexual behaviour with them, but find it difficult. Parents have questions on how to commence, which information is appropriate for their children of different ages as well as the correct words to use (McCormick and Boyer, 1981:3). Feeling incompetent, they are concerned about their own embarrassment and hope that the school will take over this parental responsibility. In contradiction to this, there is a major barrier to the initiation of sex education programmes at schools due to the lack of community support (Young and Seidensticker, 1993). Local schools have also revealed to the researcher that they want to introduce a sex education programme to pre-schools children, but lack the support of the parents. Parents argue they are responsible for sex educating their own children, but seem to fail in this regard.

4.3.2 The source of parental sex education

According to Baldwin and Bauer (1994), Gil and Johnson (1993) and Rozema (1983), there are a variety of communication patterns during discussions about sexuality by parents. Research indicates that when parents sex educate their children, mothers usually take the responsibility of sex educating both male and female children. The

second most popular source of parental sex education is the fathers who sex educate their sons, followed by mothers who sex educate their sons, and finally fathers sex educating their daughters. Baldwin and Bauer (1994:165) suggests that mothers are more approachable because they are more available, perceived as more affectionate, are not usually the disciplinarian and perceived as more knowledgeable about sex. The researcher agrees with Baldwin and Bauer (1994:165) that mothers are the primary source to sex educate their children. Ninety five percent of parents attending workshops that the researcher facilitates, are mothers. She has noticed that fathers will attend the workshop if their male child has a sex related problem.

Research by Bennet (1982:7), Finkelhor (1979) and Gil and Johnson (1993) correlates with that of Baldwin and Bauer (1994) which indicate that mothers are the prime parent responsible for sex educating children. Bennet (1982:7) questioned 180 subjects who indicated that 50% of males and 64% of females received sex education from their mothers. A study by Polulech and Nuttall (1988:2) at the University of Connecticut indicated that most parents do not sex educate their children and that 96% of the fathers avoided discussing any aspect of sexuality with their parents. A contradiction found by Polulech and Nuttall (1988:2) is that parents believe that it is their responsibility to sex educate their children and not the responsibility of the school, yet they fail to sex educate their children. As a result, older children favour professional sex educators as the preferred source of information (Bennet, 1982:8). The researcher has also found that it is mostly mothers who attend her sex education workshops and that the fathers feel that it is then the duty of their wives to sex educate the children.

4.3.3 Parental acceptance of school based sex education for pre-school children

Young and Seidensticker (1993:3) determined the factors related to a parent's acceptance or non-acceptance of school sex education. For the purpose of the survey, 119 subjects were interviewed. The questionnaire was utilised to analyse data to determine if a parent's attitude on sex education was independent of variables such as age, sex, marital status, number of children, religious affiliation, frequency of church attendance and whether or not they talk to their children about sex. Ninety four percent of the subjects indicated that they are in favour of school sex education, but felt that parents should also be responsible for sex education. It was found that the age of the parent influenced their view towards school based sex education for pre-school children. Younger parents in general reflect a more liberal perspective regarding sex and have a greater awareness for the need to sex educate their children. It was also found that those who oppose sex education in general did not complete their high school education. This information correlates with research from Finkelhor (1997), Gil and Johnson (1993), Wurtele (1993) and Friedrich (1984) indicating that those parents who are in favour of school based sex education for pre-school children, were younger and had a higher level of education compared to those parents who oppose sex education. The lower class parent was found to have a more restricted attitude to their children's sexuality compared to the middle- and upper class parent. The study by Young and Seidensticker (1993) also found that those who are in favour of sex educating their children were less religious and attended church less often.

Walters and Walters (1983:14) conclude that the family is powerful enough to shape the sexual attitudes of children and that parents do not have to be overly concerned about the possibility that school based sex education will change the sexual attitudes of children.

4.4 SCHOOL BASED SEX EDUCATION FOR PRE-SCHOOL CHILDREN

Some parents have admitted to the researcher that they assume the teachers at the pre-school will teach their pre-school children about sex, while other parents assume the teachers will take the responsibility to educate their pre-school children to protect themselves against molestation. Relying on the pre-schools to teach their pre-school children about molestation and sex, parents often do not discuss sexual issues with their pre-school children. Some parents assume that a talk on the prevention of molestation at a pre-school provides adequate information regarding sex, although these programmes do not cover sex education. These prevention of molestation programmes influence the level of parental sex education given to pre-school children, and it is important to take a critical look at the value of pre-school sex education and prevention of molestation programmes in South Africa.

Because there is no official pre-school sex education programme available in South Africa, some pre-schools invite members of the South African Police Service to address the children, or puppeteers to present a puppet show regarding “stranger danger”. These talks focus on protecting children against molestation without teaching them about sex and reproduction. Other pre-schools invite health workers, but mostly social workers, to educate parents on the sexual development of children

as well as how to protect children against molestation and to support the parents as primary sex educators for their pre-school children. In contrast to this, schools in America, Sweden and England start sex education at pre-school and at kindergarten levels (Henscke, 1984:3; Lu, 1994).

According to Henscke (1984:4), sex education programmes were implemented in America during 1984, but it was surrounded by controversy and subsequently resulted in officials being fired. Lu (1994) observed that over the past ten years, sex education has become more popular in America. She argues that more literature and audiovisual materials are available to facilitate sex education and that people are becoming more comfortable with using correct terminology and names when referring to body parts and their functions. In contradiction to this, the researcher has found that some pre-schools in Cape Town are still opposed to sex-educating their pre-school children because many parents believe that the less children know about sex, the less they will engage in sexual experimentation. The researcher was informed of the controversy caused at a school when a teacher supplied the appropriate answer to a sex-related question asked by a pre-school child. The parents reported this to the head mistress because they felt these children were too young to be sex educated and they believed that the responsibility lies with the parents.

4.4.1 Prevention of molestation programmes

In America, pre-schools have implemented classroom-based prevention of molestation programmes. Puppet shows, contests, dress-up and improvisation, videos, songs and stories are used to bring the message across to the young

learners. The same guidelines are used in the “stranger danger” talks and puppet shows that are currently used in some South African pre-schools. For this reason, it is important to examine the effectiveness of these programmes.

Gilbert (1988) criticises the effectiveness of these programmes. According to him, these messages about touching, feeling, telling, fighting back and dealing with strangers are not as simple as they may appear. He questions how much can be understood by a pre-school child. These sex education lessons are generally one to three sessions of thirty minutes each. Gilbert (1988) argues that children have a brief attention span and most of the information does not come across to the child. Lessons on ‘good touches and bad touches’ can confuse a child because most sexual touches feel good. Gilbert (1988) argues that to focus on the emotional connection of these touches is beyond what pre-school children can understand.

Gilbert (1988) refers to a study that was conducted in California, U.S.A., with 118 school children who attended a prevention of molestation programme. The findings revealed that the children were confused about the physical act of touching and the emotions it might generate. The children did not understand the indirect change of emotions that are aroused by a gentle touch that first feels good, then becomes disturbing and finally feels wrong. The children were also confused about telling secrets that made them feel uncomfortable. These programmes focus on strangers as being potentially threatening, although in reality, the victims know eighty percent of the perpetrators. Despite the fact that most often the perpetrator is familiar to the victim, parents find it reassuring that the programmes put the emphasis on the stranger. Children are taught to scream and run when a stranger tries to catch them,

but Gilbert (1988) questions whether a pre-school child can outrun an adult. He warns that the pre-school child has only gained a false sense of security. The pre-school prevention of molestation programmes convey the message to children that they own their bodies and no one has a right to touch them in a way that they dislike. There are no distinctions between spanking and bad touches, which confuse children and make them feel powerless in all situations. Finally Gilbert (1988) argues that pre-school children have no practical experience in dealing with potentially threatening situations, which leave them unequipped to deal with these circumstances. Adults are often seduced by flowers, false promises and gentle touches, but expect their pre-school children not to be seduced by gifts, sweets and attention. He concludes that the prevention of molestation programme heightened the children's sensitivity to feeling negative about any physical contact (Gilbert, 1988).

Gilbert (1988) suggests these programmes could work if more time was allocated to the programme during school hours and if the responsibility lies with the parent and the family to prevent molestation. The researcher agrees that prevention of molestation programmes can only be successful if parents sex educate their children and give them guidelines to protect themselves against molestation which are reinforced by prevention programmes at school. Gilbert (1988) emphasises that children need care and security and it is unfair to expect of pre-school children to control the dangerous world outside. The responsibility to prevent sexual molestation should lie with the parent and not the child whom we normally forbid to cross the street alone (Gilbert, 1988). He suggests that money should be spent on educating teachers and parents to detect signs of abuse, instead of teaching children to prevent it. The researcher is of the opinion that the school should invest money in educating

parents on how to sex educate their pre-school children, as well as inform parents on normal and abnormal sexual behaviour.

Wurtele (1993) argues that prevention of molestation programmes have been developed to teach children the skills and knowledge to apply in preventing or escaping sexual abuse. Ironically, most of these programmes strive to teach children about sexual abuse without teaching children about their sexuality or recognising that they are sexual beings. The emphasis of these programmes is to teach personal safety and not sexual education (Wurtele 1993:19). A study by Wurtele (1993) indicates that most young children do not know the correct terminology for genitals. This study also concluded that children who lack sexual knowledge may not be capable of disclosing inappropriate sexual acts. Children also find it difficult to ask questions about sexuality if they lack the vocabulary to do so. Thus, excluding sex education from prevention of molestation programmes, limits the effectiveness of these programmes and discourages participation of children in learning about their sexuality. Wurtele (1993:38) suggests that normal sexual development and behaviour should be included in sexual abuse prevention programmes. The study by Wurtele (1993:38) indicates that children who were taught correct genital terminology appears to be more positive about their own sexuality. These children showed more pride in their bodies and they felt that it was acceptable to touch their own genitals. Wurtele (1993:43) concludes that sexual development in children is enhanced by teaching them the correct information.

The researcher has found that prevention of molestation programmes in South Africa avoid teaching children about sex, reproduction or their physical anatomy. These

children find it difficult to disclose molestation or question their sexual behaviour because they lack the knowledge and vocabulary regarding sexual behaviour and genitals.

4.5 PROMOTING HEALTHY SEXUAL DEVELOPMENT OF THE PRE-SCHOOL CHILD

Sexual development starts at conception and extends throughout the life cycle. Healthy sexual functioning is the right of any individual. The home environment is the principal unit of socialisation for children and has a powerful role in a child's sexual development. Parents who choose to educate their children about sexuality, provide positive examples that assist in the development of sexual attitudes and knowledge. The sexual attitudes and knowledge influence the gender role and the sexual pleasure-seeking expressions of the pre-school child.

4.5.1 Two basic elements of sexual development influenced by parents

According to Baldwin and Bauer (1994:163) the two fundamental elements of sexuality within family units are: the gender role element and the sexual pleasure-seeking element. The first element is the gender role, which includes expressions of male or female behaviours such as a gender-specific way of dressing, toys and activities. Louw (1991) states that the development of the gender role is influenced by biological and cognitive factors. The biological factors are the differences in anatomy, hormones and the endocrine system. The cognitive factors indicate what the child observes within the home environment, which in turn, will influence their

gender and actions accordingly. Louw (1991) explains that children copy their parents, because they are rewarded. Children also observe their immediate surroundings and they remember the information and copy it at a later stage. The second sexual element is the erotic component, which focuses on the intimate and sensual dimension of both male and female individuals. Messages of acceptable sexual pleasure-seeking behaviours as well as levels of attraction that exist in the relationship of couples, siblings and parent-child interactions are conveyed by the family. This attraction is exemplified through appropriate physical and emotional reciprocity and interactions between adults and children. Parental sexual behaviour in the presence of children, send messages about sex and sexuality to children (Gil and Johnson, 1993:14-16). The home environment thus shapes the attitudes and behaviour of the individual's sexuality. Henscke (1984:4) concludes that parents should also communicate their feelings, attitudes and values to their children regarding human sexuality. When parents feel comfortable with their sexuality, the children will develop a healthy sexuality and when parents are affectionate with each other, children will learn to be caring and loving (Lu, 1994).

4.5.2 The influence of parental attitudes on the sexual development of the pre-school child

The child's social development is influenced by messages from parents, friends of parents, family members, printed and visual media and the peer group. When parents accept their children's appropriate genital awareness and self-touching, they learn to accept themselves. Parents teach their children emotional and physical space by how close they stand and sit to people, what topics they discuss with their

children and what they discuss in the presence of their children. Children learn sexual behaviours by observing their parents and use this as an example. Parents teach children values and morals regarding sex and sexuality by setting guidelines for nudity, touching, exploring, sexual games and sexual jokes. These guidelines will give children a balance for these activities. Parents express attitudes regarding sex and sexuality by the words they use to describe sex and sexuality as well as personal choices of television shows, films, magazines and video's. Walters and Walters (1983:10) agree with Gil and Johnson (1993) that the family plays an integral part in the sexual development of children, because the knowledge that children acquire about sex is obtained in the context of the attitudes and knowledge that is provided by the family. Baldwin and Bauer (1994) write that sexuality is a natural and normal element of individual development that is shaped by the family. Lu (1994:25) takes it further by stating that sexual learning of children takes place within the family environment by means of affection, permissiveness to express sexuality, rapport with parents and the discussion of sexual topics.

Walters and Walters (1983:9) state that the closer the family relationship, the larger the influence of the relationship on the formation of attitudes. The origins of sexuality are so deeply rooted in childhood that patterns of sexual life are very difficult to alter. The sexual nature of the parent and child interaction, such as cleaning and nurturing, contributes to the sexual development of the child. Throughout childhood, parents and children derive behaviours from and respond to each other in ways that contribute to the development and essence of the growing child's sexual attitudes (Walters and Walters, 1983:9). Lu (1994:8) writes that verbal and non-verbal parental attitudes influence children's behaviour. Parental attitudes about sex convey a

message to children through their tone of speech, facial expression and body language. Thus, parents influence the sexual attitudes, knowledge and behaviour of children and this is not easily altered with time. The development of the process is mostly subconscious, begins at birth, and parents play an integral part in this process.

Walters and Walters (1993:19) warn that parents need to examine their own attitudes and whether they want to transmit these attitudes to their children. Parents need to know that the transmission of attitudes are unintended and that dysfunctional sexual behaviour can be instilled by parents on their children. The researcher has witnessed how parents with dysfunctional sexual attitudes instil dysfunctional sexual behaviour on their children. It is not uncommon for a child who molests his peers to come from a home where sex is used as a weapon to obtain favours, or as punishment or as a way for an unloved child to feel loved. The child will use his own sexuality to manipulate his friends for his needs, favours, or as punishment. It is clear to the researcher that many sexual problems of children have their aetiology in irrational sexual attitudes learned from parents. The researcher has also counselled children with gender confusion due to the disconcerting messages of acceptable gender behaviours the parents have directly or indirectly conveyed to the children. She has found that it is not unusual for a pre-school girl to wish to be of the opposite sex when the mother resents being a female after giving up her career to look after her children. She puts the father figure on a pedestal resembling money, power, choices, career satisfaction, glamour, travelling and sport. The researcher agrees with Baldwin and Bauer (1994), Lu (1994) Walter and Walter (1993) that parents are

the most important factor in the development of gender roles and sexual pleasure-seeking expressions for pre-school children.

According to Walters and Walters (1993:13) parents should explain to pre-school children whether their parental intent is related to attitude, knowledge or behaviour. For example, when a pre-school child masturbates in public, reprimanding the child to stop will be understood as a negative attitude about masturbation. A clear acknowledgement of the issue of masturbating in public, will help prevent the child forming distorted messages and ideas. Lu (1994:21) warns that children can develop guilt towards their own body when parents forbid them to masturbate or to explore their own bodies.

Walters and Walters (1983:13) emphasise that parents should realise the home is the centre for the transferral of attitudes and that parents might mislead themselves if they rely on other sources such as the church or Sunday School to acquire desirable values for their children. They reason that, although values and attitudes are learnt at church and Sunday School, they are fitted into the norms that are acquired in the home. It is therefore unnecessary to worry unduly about what attitudes children will learn in other environments.

4.5.3 The influence of television on the sexual development of pre-school children

Television represents one of the most important and under-recognised influences on the sexual behaviour of children, including pre-school children. Children view

television and films as depicting the real world and in South Africa the media represents life portraying violence, sexual discrimination, casual sex, violent sex and other forms of promiscuity. Parents have to control the programmes and films their pre-school children are exposed to with consistency and regularity.

Strasburger and Donnerstein (1999) report that one out of four pre-school children in America have television sets in their bedrooms. The researcher could not find any available South African statistics in this regard, although she has noticed that many middle class homes and most upper middle class homes have two television sets of which one is allocated to children. In some homes pre-school children sometimes have their own television sets in their bedrooms.

Honing (1998) advises parental guidance when pre-school children watch television programmes which advocate sexual discrimination and sexual violence. He reasons that parents should help the child to understand the damage these scenarios portray and to communicate the feelings of the discriminated person if sexual violence occurs. The researcher suggests that when there are visuals of sexual discrimination on television, the parents should talk about the plot and remind the children of situations which present a positive view.

Strasburger and Donnerstein (1999:133) suggest that parents control what children view and how much they view. They recommend co-viewing to be an effective device for mediating the negative effects of television watching. In this way the parent can be a media educator as well as a value filter for the child. The American Academy of

Paediatrics (Strasburger and Donnerstein, 1999:134) suggests limiting all electronic media viewing to 2 hours a day for young children.

Strasburger and Donnerstein (1999) also suggest television sex education for children from pre-school to grade 12. They suggest computer and video games should also be used to facilitate pro-social learning. Public health problems such as sexual intercourse, interpersonal violence and drug involvement should be addressed in these educational programmes. They state that countries such as Australia, Canada, England, Scotland and South Africa all have formal media training programmes. They recommend that child education programming should be regulated to be in the best interest of children.

Strasburger and Donnerstein (1999) go further by advocating more effective public health activism to regulate the media through the government. They encourage parents to sanction the entertainment industry by watching constructive programmes and to avoid watching inappropriate television programmes. They argue that the entertainment industry should also take responsibility for the health repercussions of their products and health professions should urge the entertainment industry to restrict their programmes depicting violence and sex, and provide more programmes portraying responsible norms.

To ensure the healthy sexual development of a pre-school child, parents should not only reflect the correct sexual attitudes to their pre-school children, but also ensure that television watching is limited two hours per day, monitor what the pre-school child watches and give parental guidance.

4.6 THE PRE-SCHOOL CHILD'S PERCEPTIONS OF SEXUALITY

The perception of sexuality is related to intellectual development. In order for parents to sex educate their pre-school child, it is important for the parents to understand their pre-school child's perception of sexuality as well as their ability to understand sexual matters.

Harman and Johnson (1993:11) suggest that pre-school children's perceptions of procreation and sexual development can be understood from the Piagetian theory which assumes that intellectual development has four stages: the sensorimotor stage from birth to two years; the preoperational stage from two to seven years; the concrete operational stage from seven to eleven years and the formal operational stage from twelve years and older. Children learn about sex and sexuality in a series of stages by interacting with the environment and the people around them, then by assimilating and accommodating what they observe. Lu (1994:6) agrees that pre-school children use different strategies to satisfy their sexual curiosity. When adults around them do not provide a correct model or give inaccurate information about sexuality, children may make incorrect conclusions based upon inaccurate knowledge or they will form their own explanations (Lu, 1994:6).

According to Harman and Johnson (1993:12) pre-school children are in an advanced preoperational stage of intellectual development. Pre-school children start to think symbolically but their thinking is limited due to their inability to use logic. A symbol is a mental image of a sensory experience, and these symbols influence how children

think. Pre-school children can comprehend the basic relationship between two events and therefore their world becomes more predictable and orderly as they recognise that particular occurrences stay the same even though some changes occur. These preoperational pre-school children recognise cause and effect of events and therefore can understand the biological process of procreation. Children do understand procreation when explained to them, but it appears that incorrect information, never corrected, may continue to affect children even though higher levels of intelligence are achieved.

Although the thought processes of a pre-school child have limitations, it is important that parents are informed about a pre-school child's intellectual ability to understand procreation when it is explained to them.

4.6.1 Limitations of the pre-school child's thought processes

Harman and Johnson (1993) write that the preoperational intelligence has its limitations. The first limitation is called centration, which is the focus on one situational aspect while neglecting other aspects, which results in illogical reasoning. The second limitation is an overemphasis on realism, which makes differentiating between complete reality and fantasy difficult. The third limitation is that the preoperational child moves from one particular to another particular without generalisation, which makes abstract logic impossible. Advance reasoning of older children includes deductive reasoning (general to specific) to inductive reasoning (particular to general). The fourth limitation is egocentrism, which is the inability to consider another point of view.

4.6.2 The pre-school child's perception of procreation

With the limitations of preoperational intelligence, the pre-school child's understanding of procreation initially involves the belief that babies have always existed and were delivered to their homes. As children progress in their intellect, they believe that babies are manufactured in the same way that dolls are manufactured (Harman and Johnson, 1993:12). These are the illogical conclusions of pre-school children who are not correctly informed by the parents. Most parents incorrectly assume that pre-school children are not intellectually capable of understanding procreation. These parents need to be informed about the pre-school child's ability to understand procreation.

The researcher counsels pre-school children with sexual problems and agrees that pre-school children with their preoperational intelligence, could have irrational explanations regarding procreation. She agrees that if parents educate their children correctly, they would have the perception of procreation based on the parental sex education provided for the child.

4.6.3 The pre-school child's perception of gender identity

It is important for parents to realise that their sexual attitudes and behaviours will influence the gender role identification of their pre-school child. The gender role is the male or female role children will accept as their own, regardless of their physical sexual appearance.

Louw (1991) writes that the ages of three to six are the most important stage for gender identification. According to Louw (1991) there are many factors that influence the development of the gender role identification of the pre-school child. Firstly, there are the biological factors such as differences in anatomy, hormones and the endocrine system. Secondly, there are the cognitive factors that indicate what the pre-school child observes, which in turn, will influence the gender and actions accordingly. Thirdly, children learn from the culture and environment they are a part of and the guidelines the society prescribes for the specific gender. Fourthly, the pre-school child learns socially from their immediate surroundings by copying adults. Finally, pre-school children observe their surroundings and remember the information and copy it at a later stage.

Harman and Johnson (1993) agree with Louw (1991) indicating that during the pre-operational stage parents have already encouraged and reinforced a gender identity and attitudes towards body parts. Harman and Johnson (1993) go further by explaining that during this stage, children have explored their body parts and may have become aware of genital pleasure. Parental misinformation may result in lasting negative implications on the sexual development of the child. For example: parents who tell their children that masturbation could lead to their hands falling off could influence their adult sexual behaviour. Harman and Johnson (1993:14) warn that acquired sexual inhibition is not always altered with more advanced intellectual development. It appears that incorrect information, not corrected, may continue to affect the behaviour of the child, even when advanced levels of intelligence are achieved (Harman and Johnson, 1993:14). Louw (1991) argues that damage to gender identification that may have occurred during this period, could lead to serious

gender-related problems later in life. Louw (1991) states that by the age of six, gender role identification is completed and altering gender identification is difficult, if not impossible.

4.7 PARENTAL SEX EDUCATION FOR PRE-SCHOOL CHILDREN

The primary goal of parental sex education for pre-school children, according to Baldwin and Bauer (1994:167), should be to prevent molestation and early sexual activities. The researcher agrees that the reason for parents to sex educate a pre-school child, is to prevent molestation and inappropriate sexual behaviour between peers, as well as preventing unhealthy sexual attitudes and misconceptions due to sex education and sexual experimentation by peers.

4.7.1 Aims of parent orientated sex education programmes

Baldwin and Bauer (1994:167) refer to two different parental sex education programmes. Both programmes have the same aims, but differ in the focus.

The first sex education programme that Baldwin and Bauer (1994) refer to, is the programme developed by Bundy and White. The main aim of this programme was to increase parents' understanding of human sexual development. Their second aim was to increase parents' understanding of child development and its relation to sex education. Their third objective was to increase parents' communication skills and the fourth objective was to enhance their confidence levels when talking to their children about sex.

Baldwin and Bauer (1994) refer to another sex education programme developed by Benshof and Alexander in which the main emphasis is on enhancing communication skills between parent and child in order to sex educate pre-school children. The second aim is to encourage parents to provide a home environment that will foster learning about human sexuality. The third aim is to encourage parents to address sex education within the value perspective of the family and finally to provide resources for family discussions about sexuality.

By comparison, Bundy and White place their emphasis on parents' understanding of the sexual development of children while Benshof and Alexander focus on the importance of enhancing communication skills between parents and children. Bundy and White's sex education programme fails to teach parents about the importance of the home environment. The home environment shapes the sexuality of the child and it is therefore important that the home environment establishes boundaries for nudity, sexual exploration and television watching, as well as adequate supervision and nurturing of pre-school children.

Wurtele (1993:44) recommends that sex education programmes should promote healthy sexual development of pre-school children. These programmes should facilitate children with a balanced view of sexuality. In her opinion these programmes should include the following: correct terminology for genitals, that genital exploration is acceptable in private and that children need to protect their genitals. Wurtele (1993) also agrees with Bundy and White and Benshof and Alexander in Baldwin and Bauer (1994) that parents have an important part to play in guiding their children's

sexual development. The sex education programme of Wurtele (1993) also fails, like the sex education programme of Bundy and White (Baldwin and Bauer, 1994), to educate parents on the importance of the home environment on the sexual development of the pre-school child.

Lu (1994:28) suggests that a sex education programme for pre-school children should include the following: firstly, the biological differences and functions of body parts of the different sexes; secondly, the basic knowledge about human sexuality and how babies develop in the uterus; thirdly, pre-school children should acquire skills for taking care of and respecting other and their own bodies against molestation or unwanted sexual advances and fourthly, understanding human sexuality. The researcher agrees with the sex education programme which Lu (1994) recommends, because it includes anatomy and basic knowledge about sex and reproduction as well as preventing unwanted sexual advances.

Schutte (2000:11) maintains that pre-school sex education programmes should include the social worker, teacher and the parent. Intervention from the social worker can present an opportunity for teachers and parents to work together in creating safer environments for pre-school children.

The researcher agrees with the aims of Bundy and White and Benshof and Alexander in Baldwin and Bauer (1994), Lu (1994), Schutte (2000:11) and Wurtele (1993), but recommends that sex education programmes should combine all these aims. It is crucial that parents understand the sexual development of children to enable them to give the child sexually related information at the child's level of development and to set boundaries for acceptable and unacceptable sexual

exploration. The researcher is of the opinion that parents have to understand that providing their children with sexual knowledge, will eliminate sexual curiosity which could lead to inappropriate sexual exploration. When parents understand the sexual development of children, there will be an increase in open communication between parent and child and this will assist the parent to be proactive rather than reactive when responding to the sexuality of their pre-school children. This means that parents should teach children appropriate sexual boundaries instead of reprimanding children who have sexually explored beyond the acceptable boundaries for their age. Knowledge about the influence of the home environment on the sexuality of the child can assist the parent to establish a medium for healthy sexual development. The ideal environment for the healthy sexual development of the pre-school child, is where there are boundaries for nudity and television watching, as well as adequate supervision. When parents are better equipped with sexual knowledge, they should be better able to share this information with their pre-school children.

Sex education programmes should encourage parents to sex educate their pre-school children and equip them with knowledge on human sexuality as well as on the influence of the home environment on the sexual development of the pre-school child. The responsibility to prevent sexual molestation should lie with the parent and starts by sex educating their pre-school children.

4.7.2 Guidelines for parental sex education programmes

According to Johnson (Gil and Johnson, 1993:11), parental sex education programmes should encourage parents to start teaching their pre-school children

about sex, because children gain sexual knowledge and incorrect information from peers, the printed and visual media as well as society. McCormick and Boyer (1981:3) agree with Johnson in Gil and Johnson (1993) that talking to pre-school children about sex will counteract the daily deluge of sexual information, misinformation and indirect suggestions which children encounter.

The following guidelines should be incorporated in a parental sex education programme for pre-school children and will equip parents with the knowledge and skills to sex educate their pre-school children:

4.7.2.1 Training parents to sex educate their children

Parents lack adequate knowledge on human sexuality and the skills to sex educate their pre-school children. It is therefore the responsibility of the pre-school to facilitate this information to the parents. Allensworth (1992:22) suggests that parents should ensure that schools provide appropriate sex education within a comprehensive school health curriculum which also helps coordinate guidance and instruction for parents on sex educating their pre-school children. Baldwin and Bauer (1994:169) agree that parents should be trained to sex educate their children. They recommend that Parent and Teachers' Associations should be restructured to increase parental support and influence on the sexual education process. Johnson in Wardle (1995:17) agrees with Allensworth (1992:22) and Baldwin and Bauer (1994) and emphasises that the school has a critical responsibility to work very closely with the parents. She recommends an ongoing open communication between schools and parents about sexual behaviours and healthy sexual development of children. She suggests

conferences, newsletters, workshops and bulletin boards to convey information to parents.

It should be the role of the social worker to facilitate these educational workshops to the parents. Social workers are trained to deal with molestation and they are aware of the occurrence of molestation in the school and the community. Social workers are also involved in the national school sex education programme for adolescents and have the skills and knowledge to facilitate their knowledge to parents.

4.7.2.2 Educating parents on human sexuality

Training parents to sex educate their pre-school children should start with educating them on the basic aspects of human sexuality which include the physiological process of sexual intercourse and the biological process of procreation. McCormick and Boyer (1981:8) noted that when parents are informed about human sexuality, it is easier to talk with confidence about it to their children. Therefore, parents should be knowledgeable regarding human sexuality in order for them to explain sexual intercourse and procreation to their pre-school children.

The researcher has noted that many parents do not understand the biological process of procreation (what happens when fertilisation takes place) and therefore find it difficult to explain it to their pre-school children.

4.7.2.3 *Educating parents on normal sexual development of pre-school children*

Allensworth (1992:22) states that learning about human sexuality includes learning about child sexuality. He suggests that to become more comfortable discussing sex with their children, parents have to first educate themselves. The researcher agrees with Allensworth (1992) and has found that after parents are educated on child sexuality and how to sex educate their children, they report being eager and prepared to talk to their children about sex.

Gil and Johnson (1993) recommend immediate referral of children with problematic sexual behaviour to prevent the cycle of molestation amongst peers to develop. The researcher agrees with Gil and Johnson (1993) and has witnessed cycles of sexual abuse amongst peers develop as a result of not treating the perpetrator, or teachers and parents denying that the sexual behaviour is problematic. Only when the problematic sexual behaviour has reached extreme measures, intervention takes place. Johnson in Wardle (1995:17) and Honing (1998:18) suggest that professionals who work with children as well as parents and child caretakers, should be informed on appropriate and inappropriate sexual behaviour to enable them to report any problematic sexual behaviour.

Parental sex education programmes should educate parents about the normal sexual development of pre-school children as discussed in chapter 2. Parents should know which sexual behaviours are appropriate for their pre-school children because inappropriate sexual behaviour is often a sign of sexual abuse and an uninformed parent can not recognise the indicators of sexual abuse.

4.7.2.4 *Initiating discussions about sex with pre-school children*

McCormick and Boyer (1991:3) and Warren and Neer (1996:101) suggest that the responsibility to initiate discussions about sexuality should rest on the parent and not the child. The researcher agrees with this statement because parents have the responsibility to teach and guide their children through life, which includes their sexual life. McCormick and Boyer (1981:3) and Warren and Neer (1986:101) agree that the discussions about sex should take place in a comfortable, informal, effective and caring way. Parents should share with their children the values which they think are important to counteract information from the media and from peers. At the same time, parents should listen to what children have to say and answer questions even when they assume the child is too young for the appropriate answer, otherwise children will turn to peers or the media for unanswered questions. Lu (1994) advises that parents should answer questions in a matter-of-fact way and be open to discuss any topic on human sexuality and encourage children to ask questions about sex. The message should be conveyed that it is not bad to ask questions about sex. Henscke (1984:4) writes that direct and informative information about sex opens the lines of communication between parents and children.

It is also important for each parent to note that no evidence supports the notion that increased sexual knowledge increases sexual behaviour in children (Shelov et al 1995).

4.7.2.5 Shared responsibility for sex education of the pre-school child

Warren and Neer (1986:102) suggest that sex education is more effective if both parents share the responsibility. This will reinforce the open communication about sex and validates the fact that sex is not a secret.

The researcher has noticed an increased number of fathers attending workshops and sharing in the responsibility to sex educate their pre-school children.

4.7.2.6 Teaching pre-school children a sense of privacy and personal space

Molested children are most often children who grow up without any boundaries for nudity and a proper sense of privacy (Die Burger, 14 June 2000). A sex education programme for pre-school children should include teaching pre-school children boundaries for nudity to ensure that they develop a natural sense of shyness. The researcher believes that overly casual attitudes towards nudity fail to teach pre-school children a proper sense of privacy. Having some inhibitions and boundaries could protect a pre-school child against sexual abuse.

Pre-school children should be taught to have their own physical and sexual space and to respect the personal space of others. The researcher, therefore, suggests that nudity for the family is appropriate when it is restricted to the bedroom and bathroom and that pre-school children should be taught boundaries for sexual play.

The most important boundary to teach pre-school children is not to pull down each other's pants. Sexual play amongst pre-school children should never include one

child victimising another. This means a vulnerable child may not be picked on, or manipulated or over-powered by another child. To protect a vulnerable child, pre-school children must be taught not to partake in any activity without their consent.

Pre-school children should be taught that sexual games that include secrets, initiations into a group and bribes are usually inappropriate and participation should be avoided. Sexual games among children should not include physical pain.

4.7.2.7 Avoidance of negative reactions during sexual play

Lu (1994) and Polulech and Nottall (1988:3) suggest that adults should overcome their feelings of embarrassment and avoid using negative expressions while handling sexual issues with their pre-school children. Children's sexual exploring should not be seen as naughty and parents should avoid harsh reactions to the sexual behaviours of their children. When pre-school children participate in inappropriate sexual games, parents should use the opportunity to teach the child about sexual boundaries. It is important to first affirm the positive aspect of their curiosity and then set clear boundaries and expectations. Parents should teach their pre-school children that their genitals have a special purpose and are not to be touched by other children. Should inappropriate sexual play recur, parents could reprimand the child for disobedience.

4.7.2.8 *Progress from general sexual information to more specific sexual information*

Allensworth (1992:22) and Warren and Neer (1986:102) advise parents to discuss issues of sexuality with their children starting with general information and progressing to more specific information. Allensworth (1992) explains that general information starts with teaching children to use the correct terms when referring to genitals. Many authors emphasise that children should also be taught the definitions of genitals (Gil and Johnson, 1993; Honing, 1998; Wurtele, 1993). Honing (1998) calls this type of education, giving children naming power, just as parents do with all objects and people in their environment. Research by Wurtele (1991) has shown that children who are taught the correct genital terminology showed more positive attitudes towards their own sexuality and it enhances a healthy sexual development. Calderone (1982:29) suggests that parents can explain the purpose of the genitals to pre-school children and gives the following example: "A boy has a penis for three purposes: to feel good with; to urinate with; and to enable him to become a father some day when he is grown up, if he decides he would like to be one. A girl has three separate organs for the same things: the part for feeling good is called the clitoris; the part for passing urine is called the meatus; and the opening between the meatus and the anus is called the vagina, where, some day when she is grown up and if she decides that she wants to be a mother, sperm can enter and travel up the vagina to the uterus to meet an ovum".

The researcher agrees that children should call their genitals by the correct names. She recommends parents to teach their pre-school children that females have a

vulva and the vagina is the opening leading to the internal sex organs and that males have a penis and testicles. The researcher is aware that children are exposed to these terms during daily situations and she is of the opinion that children should know the meaning of these words to limit misunderstanding. She has spoken to many parents who teach their children different and unrelated names referring to their genitals. Parents have revealed to the researcher that they give nicknames to genitals because they feel embarrassed to use the correct names or that the correct names sound foreign. However, in the opinion of the researcher, this message about embarrassment is conveyed to the child. Many parents have shared with the researcher that their adolescents give crude names to genitals because the standard names sound foreign to them and the original nicknames do not sound appropriate anymore.

From the general information the parents must be prepared to continue to the specific, including to inform the child about the physical act of sexual intercourse. Margow (1990:25) gives the following example to explain sex to pre-school children: "When the Mummy and Daddy want to make a baby, the Daddy puts his penis in the Mommy's vaginal opening so that the sperm can come out of the fathers' penis and join with the mother's ovum. Then the baby can grow in a special place called the uterus. When the baby is big enough it comes out through the vaginal opening. The vaginal opening is especially made to stretch when a baby is ready to be born". Warren and Neer (1986:103) write that frequent discussions about sex may result in discussions to become even more specific. Polulech and Nuttall (1988:3) recommend that parents should avoid under-answering questions, but rather deal with the answer directly. Parents should help their children to realise that all questions are valid and

that parents do not always know all the answers, but are willing to find out. Formal discussions of sex can be interspersed with informal discussions. For instance when reference to sexual issues are made on television, parents can use the opportunity to open a dialogue with the child about the sexual issue. The researcher feels that questions should never be avoided because this will discourage children from returning to parents for more information. Even when parents assume the answer is too advanced or inappropriate for the age of the child, the question should be answered correctly, to prevent children from turning to friends for answers. Parents should, however, explain all factual information in an age-appropriate way to enable pre-school children to understand. Some parents explain beyond the intellectual level which the pre-school child can comprehend, in order to avoid further discussion.

4.7.2.9 Teaching the moral perspectives of the family

Parental sex education should emphasise the moral perspectives of the family which school sex education lacks. The researcher finds that the moral perspective helps to explain the emotional meaning of sex. Parents can tell children that sex keeps a couple together and that it is shared with someone you love and are committed to. The researcher warns parents that too many moral lectures can bore children and should therefore be avoided.

4.7.2.10 Focusing on human beings

The researcher is of the opinion that parents should focus on human beings when sex educating their pre-school children because non-human examples can

depersonalise sex. Human sex loses its emotional meaning as an expression of committed love when compared to sex between animals. Parents should explain to pre-school children that sex between animals is a natural consequence of a response to an instinct, but that humans are intellectual beings and have a choice to have consenting sex.

4.7.2.11 Using age appropriate books as an aid

The researcher agrees with Allensworth (1992:22) and Honing (1998:18) that parents should use children's age-appropriate books which promote discussions about sex and to help children visualise the sexual concepts. Walters and Walters (1992:9) warn that parents tend to be unaware of the fact that prior to the age of twelve, the cognitive processes are not adequate to the task of comprehending the complexities of events that cannot be seen.

4.7.2.12 Continuing the sex educating process into adolescence

Sex education should start early and begin at home. Lu (1994) explains that sex education should be a continuous process from birth into adolescence. As the pre-school child grows older more advanced sexual concepts like menstruation, sexual desire, contraceptives and sexually transmitted diseases should be discussed. Warren and Beer (1986:103) warn that if parents wait until they think their children are ready to discuss sex, the children might outgrow the need to discuss sex with them.

4.7.2.13 Avoiding self-disclosure of parental sexual behaviour

Walters and Walters (1983:13) warn that discussions about sex must exclude self-disclosure of parental sexual behaviour. Parents and children need to learn respect for each other's privacy while openly discussing sexual topics.

4.7.2.14 Developing a good self-esteem in your pre-school child

Supt. Jan Swart, the head of the Child Protection Unit of the South African Police Service, warns that children with low self-esteem could become easy targets for sexual abuse because the perpetrator recognises the needs of the victims and trades it for sexual favours (Die Burger, 14 June 2000). A sex education programme should teach parents how to encourage self-confidence in their children. Parents can give their children self-confidence by encouraging them to think for themselves and to make age-appropriate choices and take age-appropriate action. Having good self-esteem, children will have the power to stand up to a perpetrator which children with a low self-confidence, fail to do.

4.7.2.15 Empowering pre-school children

During the last four years as a facilitator of sex education workshops for parents with pre-school children, the researcher has gained valuable insights into sex education for pre-school children. She suggests that pre-school children should be empowered to protect themselves against molestation because empowerment involves giving children knowledge and boundaries regarding sex as well as techniques and skills to allow them to take action against a perpetrator. Pre-school children should be taught

to question authority because very often the perpetrator is a person who is in a position of authority. When the perpetrator's rules are immoral, the child needs the knowledge, skills and confidence to question the perpetrator's authority. This skill of assertiveness will assist the child to make good judgements. Parents can develop this by praising their pre-school children for speaking their minds, demonstrating strength or asking questions. Pre-school children should also know the support systems in the community, for example, the police, doctors and teachers or a reliable adult. Pre-school children should have the right to oppose inappropriate touches and to feel in charge of their own bodies. Parents should teach their pre-school children that their bodies are their own and that they have the right to say 'no' to inappropriate advances. Pre-school children should also be taught to have no secrets from their parents and to realise that people with negative intentions will convince children to keep secrets. Parents should teach their pre-school children to trust their own instincts because children who are molested report feeling uncomfortable prior to the assault. Children's instincts will give them a warning message when in danger.

4.7.2.16 Enhancing family life

McCormick and Boyer (1981:6-7) advise that sex education programmes for pre-school children should encourage parents to enhance and enrich family life, because parents communicate messages about sexuality through their behaviour. Children learn about sexuality by observing how affection is shown in the family, the manner in which the family discuss sexual topics and by the words they use to refer to the reproductive parts of their bodies. Sexuality is conveyed to our children through our physical, emotional and spiritual responses, thoughts and feelings, which make it a

lifelong dynamic which parents pass on through generations. The sexual behaviour of parents should therefore reflect their values and beliefs.

When parents understand the sexual development of their pre-school children, they will understand how it relates to sex education. Increased knowledge, regarding the sexual development of pre-school children, will give the parents the confidence to talk to them about sex. Knowledge, communication skills and confidence will empower the parents to be open and approachable sex educators for their pre-school children.

4.8 SUMMARY

It is important that pre-school children learn about human sexuality in a healthy way through parents and not through friends, the media or being a victim of molestation by adults or peers. Parental sex education programmes should open up the lines of communication between parents and children by informing parents about their responsibility to protect their children and to convey factual information regarding human sexuality, molestation, as well as the influence of the home environment on the sexual development of the pre-school child.

The empirical data is presented in the following chapter which includes an introduction and analysis of the collected data.

CHAPTER 5

PARENT ORIENTATED SEX EDUCATION

AND THE HOME ENVIRONMENT OF

THE PRE-SCHOOL CHILD

5.1 INTRODUCTION

Child sexual abuse invades the inner being of a child and has devastating consequences for the victims throughout their childhood and adult lives. If sexual abuse can be prevented, it eradicates both the distressing experiences of the child relating to the abuse and the subsequent professional and judicial processes, which the abuse may involve (Schutte, 2000:9). The main aim of prevention is to facilitate a parent orientated sex education programme, which promotes parental sex education for pre-school children and to foster a neutral home environment for the pre-school child which encourages healthy sexual development.

The objectives of the study were to present demographic data on the mothers and the prevalence of parental sex education for pre-school children; to describe the home environments of pre-school children; and to describe the opinions and awareness of the mothers with regard to the occurrence and handling of the sexual behaviour of their pre-school children. These objectives have been formulated in order to achieve the overall aim of the study, which is to present guidelines for the

composing of a parent sex education and personal safety programme for pre-school children. The results of the empirical study, which was undertaken by the researcher, will now be discussed.

5.2 PLACE OF STUDY

The research study was demarcated to the area of the southern and northern suburbs of Cape Town in the Western Cape, in a radius of 40 km from where the researcher resides in Muizenberg. The sample for the study was drawn from the mothers of pre-school children of a sample of four pre-schools in the demarcated area. The demarcation of the place of study was explained in Chapter 1 of this report.

5.3 THE EMPIRICAL STUDY

The sample consisted of four pre-schools from the northern and southern suburbs of Cape Town. Two hundred and ten mothers with pre-school children were involved in the study. Using the availability sampling technique, 210 questionnaires were distributed to the mothers at the four schools in the demarcated area (see Chapter 1). Friedrich et al (1991:457) maintain that mothers are more knowledgeable regarding the sexual behaviours of their children. Only 83 of the 210 mothers were willing to complete the questionnaire, which was not compulsory. The respondents completed the questionnaire in the presence of the researcher, at a parents evening before the meeting commenced. The questionnaire was based on the aim and objectives of the study as described in Chapter 1, as well as on the content of the literature study, which was presented in chapters 2, 3 and 4 of this report.

The questionnaires provided for the anonymity of the respondents.

5.4 RESULTS OF THE RESEARCH

The data collected from the completed questionnaires will be discussed in the same sequence as presented in the questionnaire. Tables and figures are presented to describe responses to closed-ended questions. The responses to open-ended questions, which were used to obtain qualitative data, were analysed. This data is presented in a descriptive manner.

5.4.1 Methodological problems

It is important to note that three types of distortions may invalidate this survey. The first is caused by the refusal of certain mothers to participate and whose opinion is therefore unknown to the researcher. This is known as "volunteer bias". A second type of distortion is caused by the refusal of people who do participate, to report accurately, and is called "response invalidity". The third distortion is that approximately one-third of the study population was excluded as a result of non-attendance of the parent meetings (Grinnell, 1993:293-295).

The researcher acknowledges the possibility that there could be a relation between parents who sex educate their pre-school children and parents who attend parent meetings and in general show more involvement in their pre-school children's education. The parents who voluntarily participated in the survey could also be those

who are in favour of sex educating pre-school children, and who wanted to voice their opinion.

Although the researcher acknowledges the possibility of the study population being biased, it is her opinion that the parents who attended the parent meetings and who voiced their opinions in the survey are the parents who will be responsible for the decision-making processes at pre-schools regarding the implementation of a sex education and personal safety programme.

5.4.2 Identifying information of the mother

Friedrich et al (1991) and Young and Seidensticker (1993:3) maintain that stereotypical perceptions have developed regarding the type of mother who sex educates her pre-school children. These include the perceptions that the age, marital status, number of children and academic achievement influence the mother's acceptance of sex education for her pre-school child. According to Young and Seidensticker (1993:3), younger mothers who are married, with less than four children and who have completed their high school education, reflect a more liberal perspective regarding sex and have a greater awareness for the need to sex educate their children. The researcher wanted to determine whether these findings are applicable to the situation in the southern and northern suburbs of Cape Town, Western Cape, South Africa.

Thus, the data obtained from the completed questionnaires will be used to present an identifying profile of a mother who should appear to sex educate her pre-school child.

In this section, the findings of the identifying characteristics of all the mothers (83 respondents) will be discussed.

5.4.2.1 Academic qualification

Friedrich et al (1991) maintain that mothers who have completed their high school education are more likely to sex educate their pre-school children as compared to those who did not complete their high school education. The findings will determine the correlation between sex education and academic qualification of mothers.

Figure 5.1 below reflects the academic distribution of the respondents.

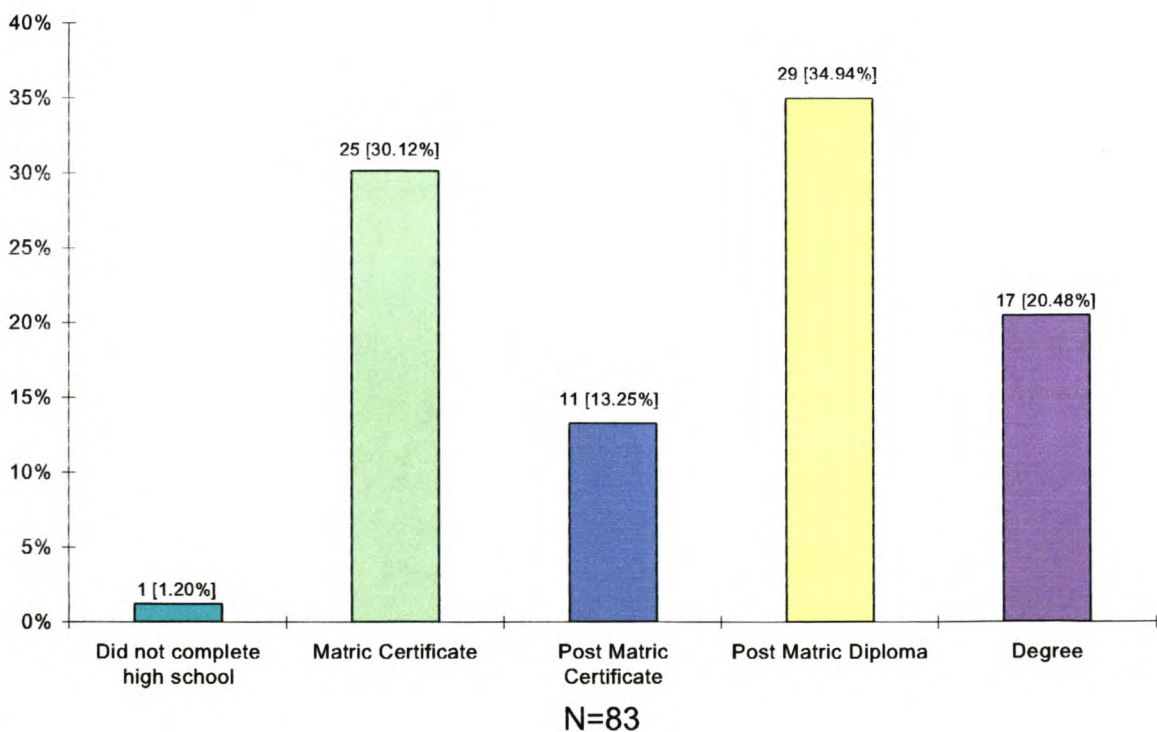


Figure 5-1 Academic distribution of the respondents

The findings in Figure 5.1 clearly indicate that the majority of respondents have completed their high school education. Figure 5.1 reflects that of the 83 mothers that

responded, only one (1.2%) did not complete high school, while 25 (30.2%) obtained their matric certificate, and the majority, 57 (68%⁶⁷) have post matric training and represent a well-educated sample

Friedrich et al (1991) and Young and Seidensticker (1993) maintain that mothers who completed their high school education are more likely to sex educate their pre-school children. From the above-mentioned findings it can be assumed that the majority of mothers would sex educate their pre-school children. The high frequency of mothers who have completed their high school education can however be ascribed to the fact that the area from which the sample was collected, is dominated by a white upper middle class society. These findings will in all probability differ from area to area depending on the ethnic and economic distribution of the respondents.

5.4.2.2 *Marital status*

Friedrich et al (1991) and Young and Seidensticker (1993:3) maintain that married women are more likely to sex educate their pre-school children compared to single, divorced or widowed mothers. Baldwin and Bauer (1994:163) assume that the family unit assists in the development of sexual knowledge. The family unit transmits messages of acceptable sex roles and couple relationships to children and subconsciously encourages parents to discuss issues of sexuality, intimacy, values and reproduction with their children. With the outcome of marital status and sex education, the researcher wanted to determine the correlation between marital status and sex education of pre-school children.

The marital distribution of mothers is reflected in figure 5.2 below.

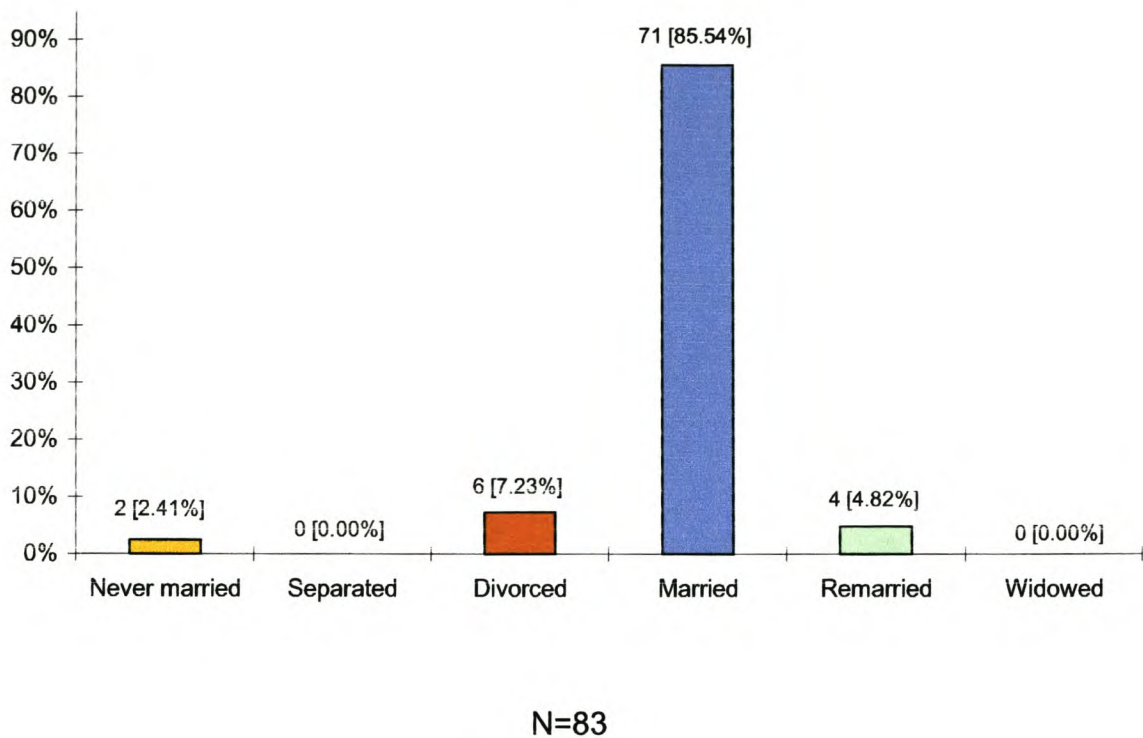


Figure 5-2 Marital status of mothers

Figure 5.2 reflects that a majority of 71 (85,54%) mothers were married. This is followed by four (4.82%) of the mothers who were remarried, two (2.41%) who have never been married and six (7.23%) who were divorced. The overall majority of the mothers were married and sex educated their pre-school children. From the above mentioned findings it can be concluded that married mothers are inclined to sex educate their pre-school children.

5.4.2.3 Age distribution

Friedrich et al (1991) and Young and Seidensticker (1993:3) found that mothers older than 35 years are less inclined to sex educate their young children, while women

between 20 and 30 were more likely to sex educate their young children. In this study, this question was asked to determine the correlation between the age of the mother and her attitude towards sex education for pre-school children.

The age distribution of mothers is reflected in figure 5.3 below.

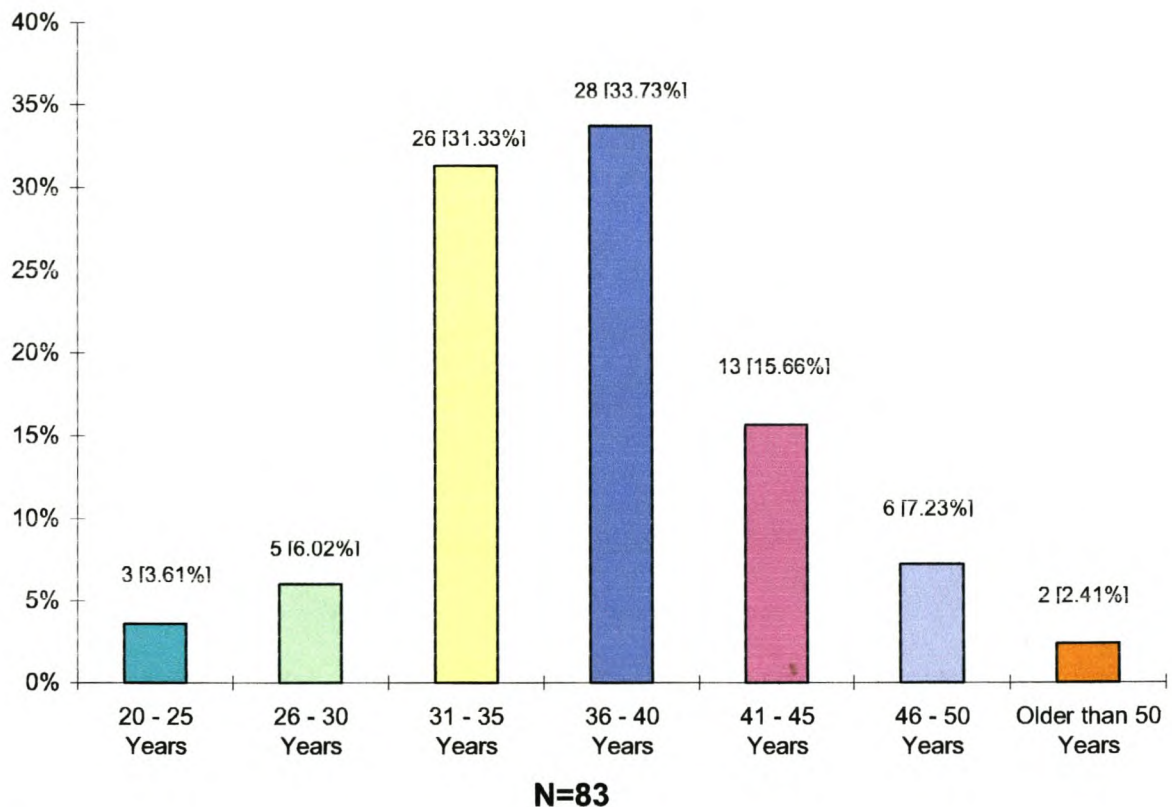


Figure 5-3 Age distribution of mothers

Figure 5.3 shows that a majority of 28 (33,73%) mothers fall in the age category of 36 to 40 years of age. This is followed by 26 (31,33%) of the mothers who are aged between 31 and 36 and 13 (15.66%) mothers who fall into the age category of 41 to 45 years. The remaining 16 (19.2%) mothers are either older than 45 or younger than 30.

From the above figure it would appear that the statement made by Friedrich et al (1991) and Young and Seidensticker (1993:3), that age influences mothers to sex educate their pre-school children, does not reflect in this research study. The majority of mothers from all ages sex educate their pre-school children.

5.4.2.4 *Number of children*

Friedrich et al (1991) and Young and Seidensticker (1993:3) maintain that mothers with three or less children are more likely to sex educate their young children as compared to mothers with more than three children. In a family of more than three children, the oldest sibling is subconsciously given the responsibility to sex educate the younger pre-school sibling of the same sex. Finkelhor (1979) also emphasises that in large families, members are sexually more accessible to one another and incest occurs more frequently. In large families, increased sexual abuse may occur due to the greater age span between youngest and oldest sibling. In order to determine whether there is a correlation between the size of a family and sex education, the status of these findings are discussed below.

The data obtained is reflected in figure 5.4 below.

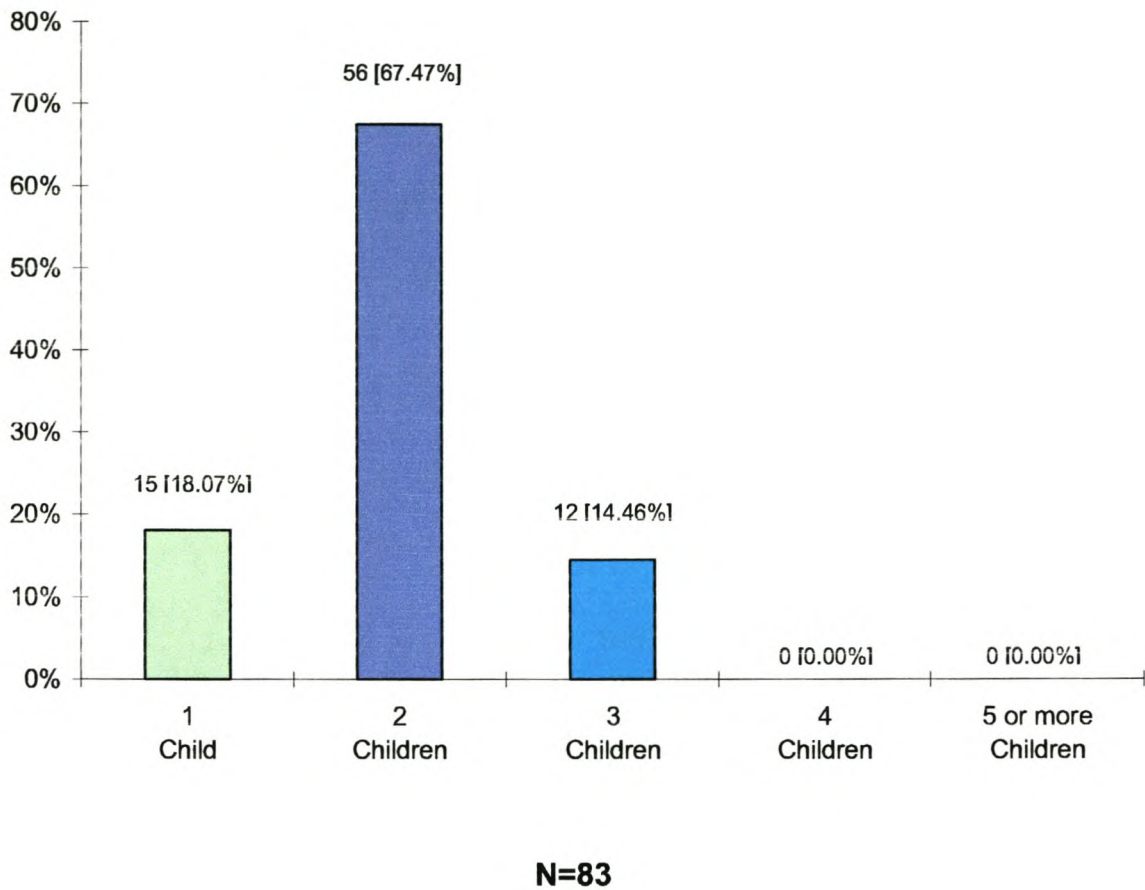


Figure 5-4 Number of children in the family

From figure 5.4 it can be concluded that 56 (67.47%) of the mothers have two children. This is followed by 12 (14.46%) mothers who have three children. Fifteen (18.07%) of the mothers have only one child. Of the 83 respondents, 76 (91.57%) mothers are in favour of sex education. These findings are in accordance with the findings of Friedrich (1991) and Seidensticker and Young (1994) who concluded that mothers with less than four children are more likely to sex educate their pre-school children. The respondents have small families and they were not more at risk to sexual abuse as compared to large families.

In analysing these findings it seems that the majority of the mothers are between 30 and 40 years of age, are married with two children and have at least completed their high school careers.

This profile describes the average mother in the survey as being well educated and who represents a nuclear family of a married couple with two to three children. These findings are in accordance with the most of the findings of Friedrich et al (1991) and Young and Seidensticker (1993) who concluded that mothers who are married, are under 30 years of age, have less than four children, and who completed their high school education, are more likely to sex educate their pre-school children. Unlike the study by Friedrich et al(1991) and Young and Seidensticker (1993), the mothers from all age groups sex educated their pre-school children. It is, however, unlikely that mothers in all communities would express the same opinions as those who ascribe to the stereotypical criteria of mothers who are likely to sex educate their pre-school children.

Parents who attend parent meetings are generally those who want to participate in, or supervise the management of the school their pre-school children attend. These are the parents who would generally participate in a survey to voice their opinion regarding the education of their pre-school children. Although this study may have over represented mothers who are in favour of sex educating their pre-school children, it represents mothers who are involved in the school and who participate in the decision-making and education of their children. It could be assumed that the 127 (60.5%) of the study population who did not complete the questionnaire, are the

mothers who do not wish to voice their opinion, or who generally follow the decisions that are made by the majority of the parents.

5.4.3 Information regarding the pre-school child

5.4.3.1 Age distribution of pre-school children

Schutte (2000:11) maintains that pre-school children are able to master the concepts of personal safety programmes and internalise the knowledge. Erooga and Masson (1999:7) conclude that the mean age of a perpetrator's first experience of sexually abusive behaviour is 6 years and 9 months and the average age of the victim is 4 years and 4 months. Warren and Neer (1986:86) agree with Erooga and Masson (1999:7) that parents should introduce sex education to children at the age of three. They maintain that parents are perceived as being more effective communicators the sooner they commence with sex education. The researcher wanted to determine whether there is a correlation between mothers who are in favour of sex education for pre-school children and the age of the pre-school child.

The age distribution of the pre-school children is reflected in figure 5.5 below.

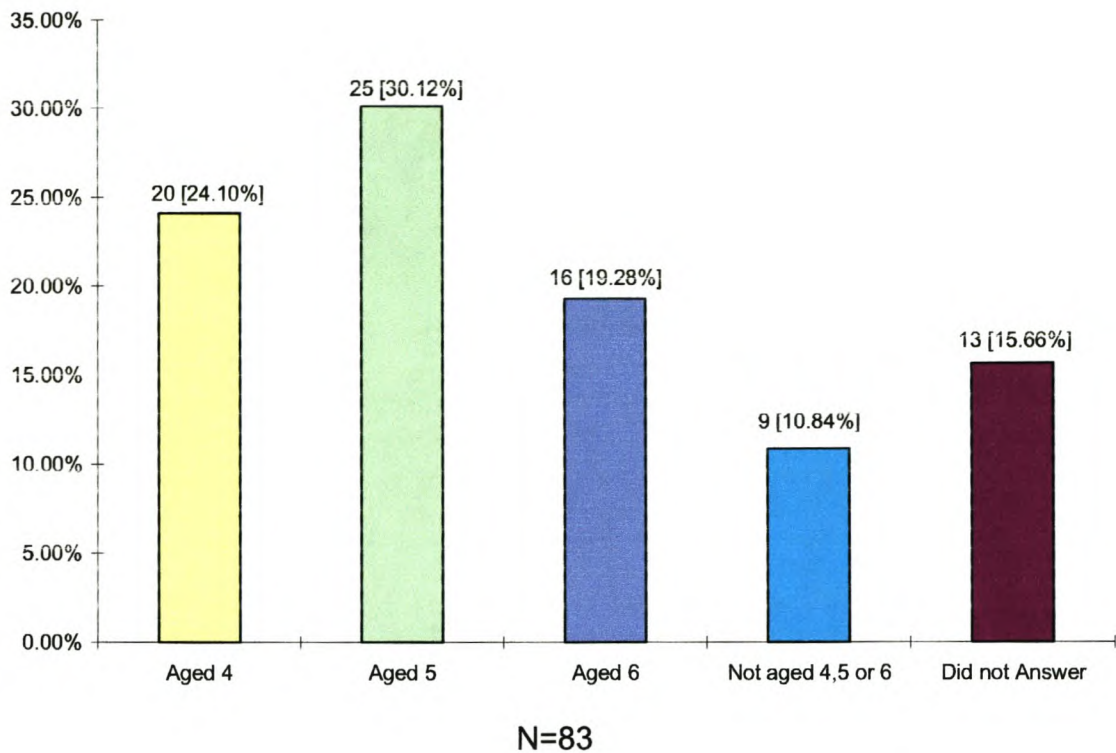


Figure 5-5 Age distribution of the pre-school children

Figure 5.5 reflects that 20 (24.10%) of the pre-school children fall into the age category of four years. This is followed by 25 (30.12%) of pre-school children who are aged five, and 16 (19,28%) pre-school children who fall into the age category of six. Nine (10.84%) of the mothers indicated that the pre-school children were not 4, 5 or 6 years old. Thirteen mothers failed to indicate the age of their pre-school children. A majority of 76 (91.57%) mothers sex educate their pre-school children and would agree with Schutte (2000) that pre-school children can master and internalise the concepts of personal safety.

5.4.3.2 *Gender of pre-school children*

Baldwin and Bauer (1994:165) assert that mothers primarily discuss sex related issues with their daughters, followed by fathers who discuss sex related issues with their sons. Gil and Johnson (1993) and Warren and Neer (1986:99) maintain that girls are more likely to receive sex education as they are regarded as more vulnerable to sexual molestation. Parks (1990:29) concludes that the role of the wife is often transferred to the daughter in sexually abusive homes, while boys are often not seen as being susceptible to sexual molestation. With this information in mind, the researcher wanted to determine whether there is a correlation between the gender and sex education of a pre-school child.

The gender distribution of the pre-school children is as follows. Of the 83 mothers, 38 (45.78%) have boys and 27 (32.53%) have girls. This is followed by 3 (3.61%) mothers who have both boys and girls in pre-school. The remaining 12(14.46%) mothers did not answer the question. Of the 83 respondents, 76 (91.57%) mothers are in favour of sex educating their pre-school children. From the 7 (8.43%) mothers who were uncertain or were opposed to sex education for pre-school children, two mothers indicated that they have boys and five mothers indicated that they have girls.

From the above-mentioned findings it can be concluded that mothers are in favour of sex educating their pre-school children, regardless of their gender.

5.4.3.3 *Order of pre-school child within the family*

Walters and Walters (1983:8) maintain that parents provide the oldest sibling with more sex information as compared to the younger siblings. Parents appear to overestimate the quality and dimension of sexual knowledge transferred from the oldest sibling to the younger siblings

The order of the pre-school children is as follows: of the 83 respondents, 35 (42.17%) indicated that their pre-school children are the oldest, followed by 26 (31.33%) parents who reported that their pre-school children are the youngest. One mother (1.2%) indicated that her pre-school child was the middle child. The remaining 21 (25.3%) mothers did not indicate the position of their pre-school child.

Unlike the study by Walters and Walters (1983:9), mothers sex educate their pre-school children regardless of their order in the family.

5.4.3.4 *Supervision after school of the pre-school child*

Gil and Johnson (1993) maintain that parents who supervise their own children after school are less inclined to sex educate their pre-school children. Parents assume sex education and personal safety programmes are only necessary if the child is not in the care of the parent. The outcome of this question will enable the researcher to determine the correlation between sex education of pre-school children and supervision of the child after school.

Of the 83 respondents, 38 (45.78%) mothers indicated that their pre-school children were in their own care during the afternoons, while 30 (36,14%) mothers reported that their pre-school children stayed at the aftercare at their school. Eight (9.64%) of the mothers indicated that their pre-school children were supervised by a domestic servant while two (2.41%) mothers reported that their pre-school children were supervised by a friend and three (3.61%) were supervised by a family member. The remaining two mothers did not answer this question. It was interesting to note that the five (6.02%) mothers who were not in favour of sex education for pre-school children, supervised their own children during the afternoons. However, many mothers who did supervise their children after school, were in favour of sex education for their pre-school children.

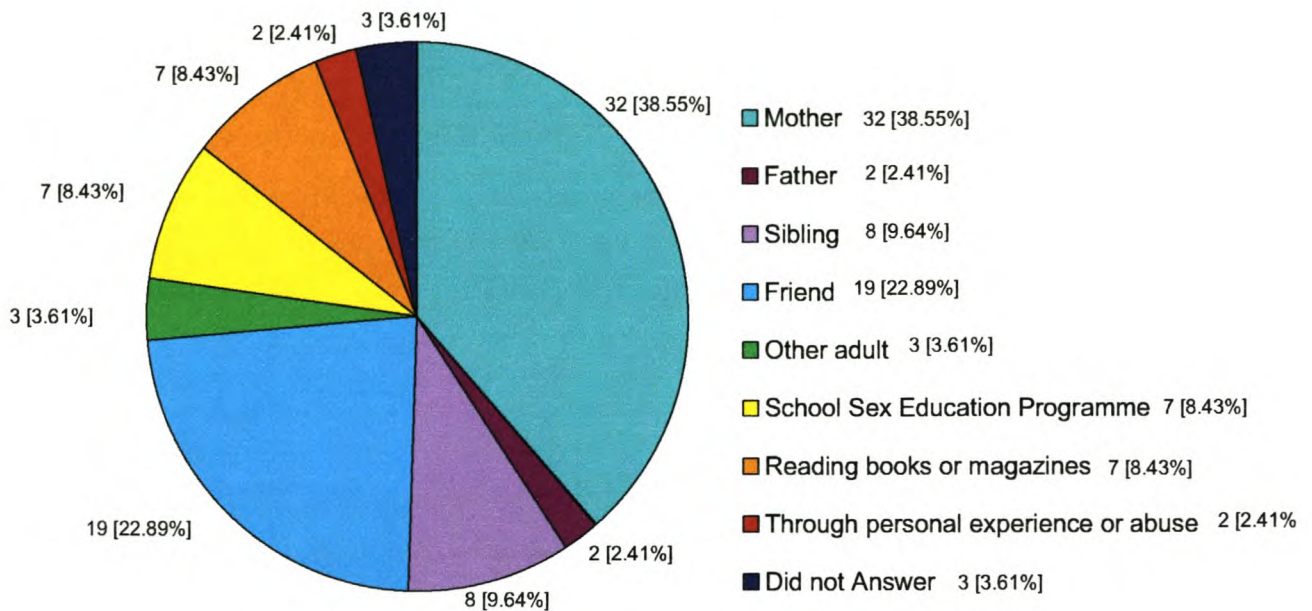
5.4.4 Sex education of mothers

There is a general agreement amongst those who have developed sex education programmes that the majority of children are sex educated by their friends or through the media (Allensworth, 1992; Calderone, 1982; Gil and Johnson, 1993; Lu, 1994; Warren and Neer 1986).

5.4.4.1 *First sex education lesson of the mother*

Baldwin and Bauer (1994:162) maintain that most parents believe it is unimportant to sex educate their children. They refer to sex as being a taboo topic to discuss and that parental sex education is avoided in most societies. With this question the researcher wanted to determine by whom the mother was sex educated.

The findings of the survey are presented in figure 5.6 below.



N=83

Figure 5-6 Indication of who first sex educated the mother

A majority of mothers (32 or 38.55%) indicated that they received their first sex education from their mothers, while 2 (2.41%) were sex educated by their fathers. This was followed by 19 (22.89%) mothers who indicated they were sex educated by a friend. Eight (9.64%) of the mothers reported that they had been sex educated by a sibling, whereas seven (8.43%) were sex educated by reading a book. Another seven (8.43%) of the mothers were sex educated by a school sex education programme while three (3.61%) were sex educated by another adult. A minority of two (2.41%) mothers indicated that they learnt about sex through sexual abuse. Three (3.61%) mothers did not complete the question.

Polulech and Nuttall (1988:5) maintain that the home is probably the best place for sex education, but according to most studies, parents are not the primary source of information about sex. Unlike the studies done by Allensworth (1992), Calderone (1982) Gil and Johnson (1993), Lu (1994), Rozema (1982) and Warren and Neer (1986), the majority of mothers (32 or 39%) were sex educated by their mothers. The assumed reluctance amongst mothers to sex educate their children was not validated by this survey. It was also meaningful to note that those mothers who were sex educated by their parents, continue with the tradition and sex educate their own pre-school children.

5.4.4.2 Personal first impression of sex education

Twenty-six (31.33%) mothers reported their first impression of sex education was positive, while 16 (19.28%) mothers reported it to be negative. Thirty-eight (45.78 %) respondents reported that their first impression of sex was neutral. Three (3.61%) mothers did not complete the question.

As might be expected, the majority of the mothers who were sex educated by their mothers, indicated that their first impression of sex was primarily positive or neutral, compared to mothers having negative first impressions after they had been sex educated by the media or friends. These findings are in accordance with the findings of Baldwin and Bauer (1994:163) and Walters and Walters (1983:8) who concluded that the media and friends give children a negative impression of sex, while parental sex education provide children with a positive or neutral impression about sex. Of the

26 mothers who indicated that their first impression of sex was positive, 25 sex-educated their pre-school children.

5.4.4.3 *Questioning sexual issues*

Only twenty (24.1%) mothers indicated that they questioned their parents about sex, while a majority (62 or 74.7 %) reported that they did not ask their parents about sex. One mother did not answer the question. The mothers who questioned their parents about sex, are those who received parental sex education.

These findings are in accordance with the findings of Baldwin and Bauer (1994:62) and Polulech and Nuttall (1992) who found that children do not question their parents about sex. It can be concluded that parent orientated sex education encourages open communication between parent and child regarding sexual issues.

5.4.4.4 *Parental reaction to questions*

When the mothers questioned their parents about sex, five (6 %) reported that they were dismissed without the question being answered, while 28 (33.7 %) of their mothers answered only the question asked. Two (2.4 %) of the mothers indicated that more than just the question was answered, and 8 (9.6 %) mothers reported that they were invited by their parents to ask further questions. Seventeen (20.4%) of the mothers reported that their parents tried to ignore the question and two (2.4 %) reported that their parents sometimes answered or ignored. Twenty-one (25.5%) of the mothers did not answer the question.

Baldwin and Bauer (1994:162) maintain that parents react with discomfort and avoidance to questions about sex. Young and Seidensticker (1993) concluded that parents feel embarrassed to answer questions about sex and subsequently retreat into silence. Unlike the study done by Baldwin and Bauer (1994) and Young and Seidensticker (1993), 38 (45.78%) of the mothers received answers to their sex related questions and only 22 (26.51%) were dismissed without an answer. As more than half of the mothers received answers to their sex related questions, it can be concluded that mothers do supply their children with answers to their sex related questions.

5.4.4.5 *Parents as a reliable source for sex education*

Thirty (36.1%) mothers indicated that they thought their parents were a reliable source for sex education, while 49 (59%) reported that they were not a reliable source. Four (4.82%) mothers did not answer the question.

These findings are in accordance with the findings of Rozema (1983:9) who concluded that many parents provide their children with incorrect explanations regarding human sexuality. Baldwin and Bauer (1994) found that most parents received inadequate sex education and therefore felt unequipped to sex educate their children adequately.

5.4.4.6 *Age when sex educated*

Forty-three (51.81%) mothers reported that they were in senior primary school (grade four to seven) when they learnt about sex, 23 (27.71%) mothers reported that they learnt about sex in senior school and 12 (14.46%) reported that they learnt about sex in junior primary school (grade one to three). Only two mothers (2.41%) indicated that they learnt about sex in pre-school and one (1.2%) mother learnt about sex after school. Two (2.41%) mothers did not answer the question.

From these findings it can be concluded that the majority of mothers were sex educated during their senior primary school years. These findings are in accordance with the findings of Baldwin and Bauer (1994), Polulech and Nuttall (1988) and Young and Seidensticker (1983) who conclude that parents consider sex education for children before they reach early adolescence (10 –13 years). For females, this period is characterised by breast enlargement, pubic hair growth, a height spurt, and menarche (first menstruation). Males experience the proliferation of pubic hair, a height spurt, and additional enlargement of genitalia (Levine, Carey and Crocker, 1992). Baldwin and Bauer (1994) argue that parents do not sex educate their children prior to early adolescence, because many parents may view human sexuality within a narrow framework, especially in relation to their children.

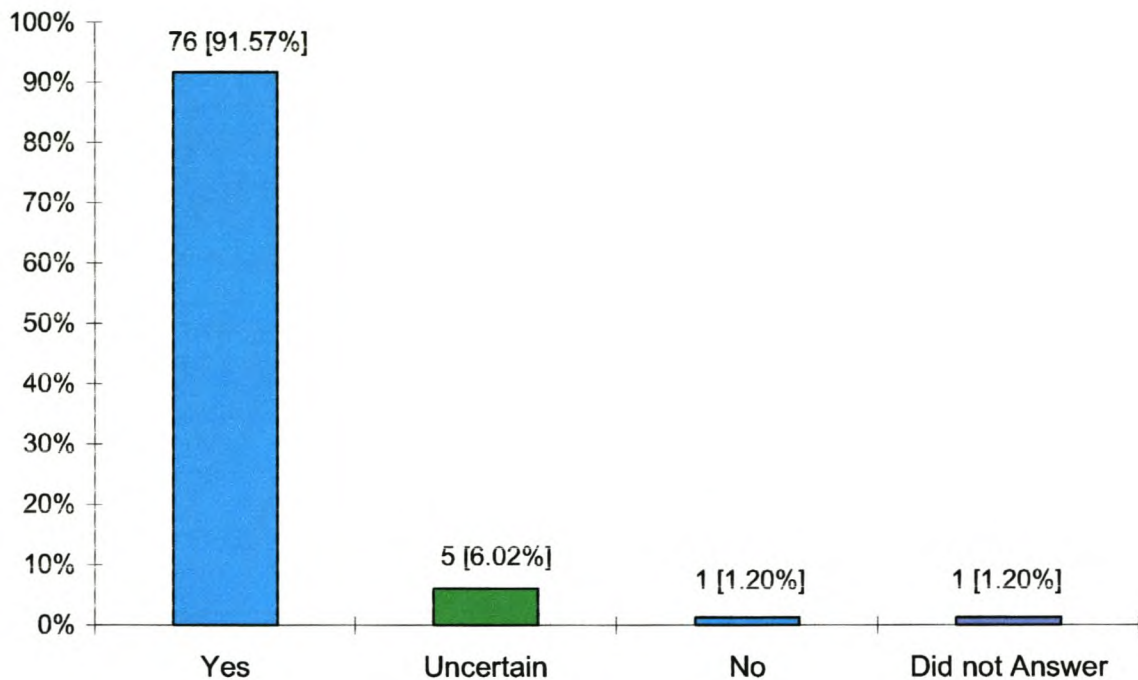
Seventy-six (91.57%) of the mothers indicated that they have sex educated their pre-school children. It can thus be concluded that parents presently sex educate their children earlier compared to a generation go.

5.4.5 Attitudes and beliefs of the mother on sex educating a pre-school child

Baldwin and Bauer (1994:162), Friedrich et al (1991) and Gil and Johnson (1993) maintain that parents do not sex educate their pre-school children. Respondents were requested to indicate their beliefs and attitudes regarding sex education for pre-school children. The aim was to determine the mothers' attitude towards sex education for pre-school children.

5.4.5.1 Parental attitudes to sex education

Gil and Johnson (1993:11) further maintain that parents have an important role in teaching their pre-school children about sex and sexuality. Unfortunately, many parents provide pre-school children with absolutely no information regarding sex and sexuality.



N=83

Figure 5-7 Mothers favouring sex education for pre-school children

The findings in Figure 5.7 clearly indicate that the majority of the parents are in favour of sex education for pre-school children. Of the 83 respondents, 76 (91.57%) of the respondents indicated that pre-school children should be sex educated while five (6.02%) indicated that they are uncertain. Only one (1.2%) mother indicated that a pre-school child should not be sex educated and one (1.2%) respondents did not answer the question. Unlike the studies by Friedrich et al (1991), Gil and Johnson (1993) and Young and Seidensticker (1993), the majority of the mothers are in favour of sex education for pre-school children. In South Africa there is currently a public awareness campaign by media coverage regarding the urgency and necessity to

sex-educate children from a very young age. It can be assumed that the mothers from this survey could have been influenced by these educational radio and television programmes, or by books and talks that encourage parents to sex educate their pre-school children.

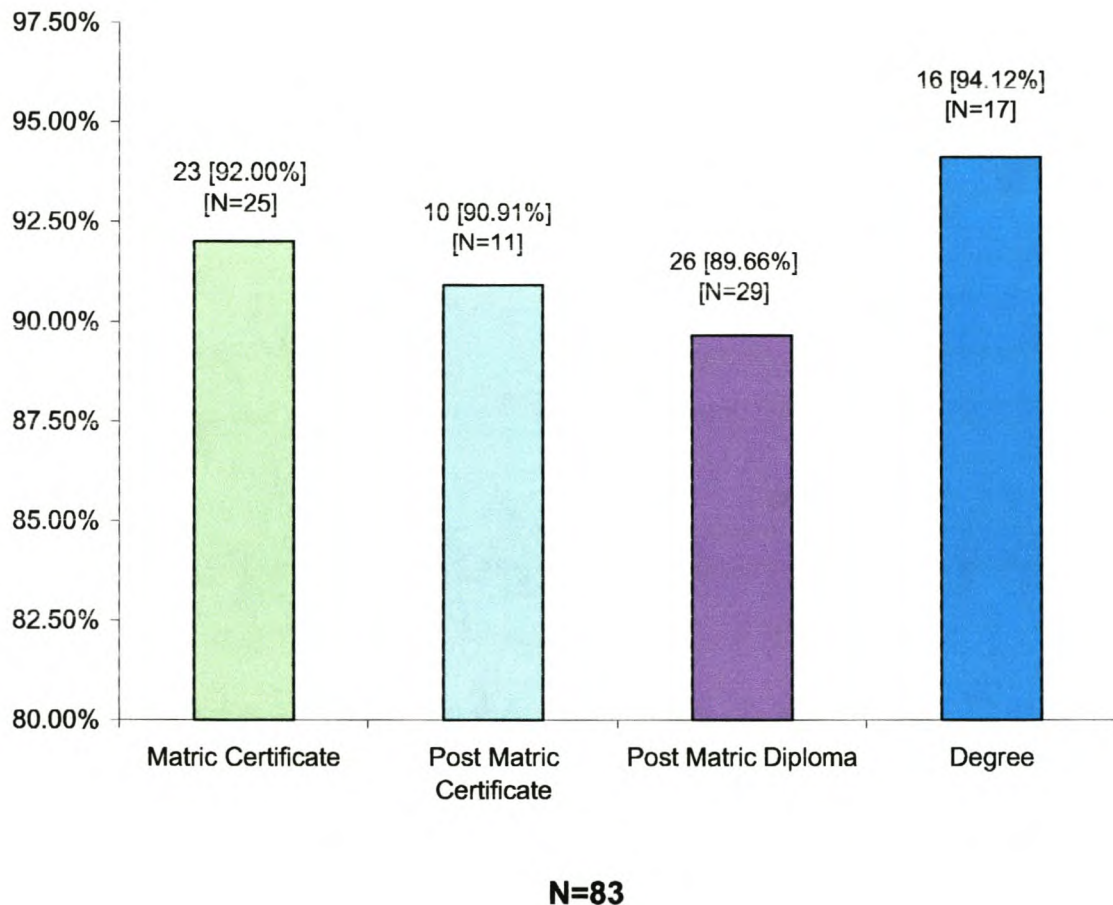


Figure 5-8 Correlation between mothers who sex educate, and the academic qualification of the mothers

The above Figure 5.8 shows the correlation between sex education of pre-school children and the academic achievements of the mothers. Of the 82 qualified mothers, 75 (91.46%) sex educated their pre-school children. Of the 25 matriculated mothers, 23 (92.00%) sex educate their pre-school children. Of the 11 mothers with a post

matric certificate, 10 (90.91%) sex educate their pre-school children. Of the 29 mothers with a post matric diploma, 26 (89.66%) sex educate their pre-school children. Of the 17 graduated mothers, 16 (94.12%) sex educate their pre-school children. One (1.2%) mother did not complete her school career.

These findings are in accordance with the findings of Friedrich et al (1993), Gil and Johnson (1993) and Young and Seidensticker (1993) who concluded that mothers who completed their high school education are in favour of sex education for pre-school children. According to Young and Seidensticker (1993:3) sex education for pre-school children is also influenced by the age, marital status and the number of children the mother has. In analysing these findings it seems that the majority of the mothers are married with two or three children. From the above-mentioned findings it can be concluded that these stereotypical qualities influenced the mothers to sex educate their pre-school children. Unlike the findings from the study done by Young and Seidensticker (1993), the age of the mothers did not play a role in sex educating their pre-school children.

5.4.5.2 *The source of sex education for pre-school children*

Fifty nine (71.08%) mothers indicated that parents should sex educate their pre-school children while 18 (21.69%) indicated that both the parent and the school should sex educate pre-school children. Two respondents (2.4%) indicated that the school should sex educate pre-school children. Four (4.82%) mothers did not answer the question.

These findings are in accordance with the statement of Baldwin and Bauer (1993) and Polulech and Nuttall (1988:2) that parents prefer to sex educate their pre-school children. The mothers motivated this statement by the following responses. One (1.2%) mother explained that when parents sex-educate their own children they can emphasise the moral perspectives of the family. This is not possible when they receive sex education at school. Another (1.2%) mother indicated that she felt that if parents sex educate their pre-school children they can monitor the facts and impressions learnt from friends as well as the school environment. Parental sex education also moulds the pre-school child's perception of sex before society does. Friedrich et al (1991) and Gil and Johnson (1993) agree and emphasise that parents are responsible for sex educating their pre-school children.

In contradiction to parental sex education, research by Young and Seidensticker (1993) conclude that parents prefer the schools to sex educate their pre-school children. They argue that parents feel incompetent and hope that the school will take over this parental responsibility.

5.4.5.3 Perceptions of mothers on reasons for not sex educating pre-school children

The five (6.02%) mothers who indicated that pre-school children should not be sex educated stated that pre-school children are too young, sex is too complicated for a pre-school child to comprehend and they were afraid of frightening the child with details about sex.

These findings are in accordance with the statements from Lu (1994:25) and Rozema (1993:5) who emphasise that parents consider pre-school children to be too immature to understand sex. Rozema (1993) further maintains that there is an inconsistency in the parents' evaluation of the comprehension level of children. Some parents maintain that pre-school children cannot understand the information regarding sex, but they will argue that they are capable of understanding complicated issues such as gravity.

Respondents were requested to indicate any further beliefs why pre-school children should not be sex educated. No additional reasons were provided. It can thus be concluded that the available options to choose from corresponded with their beliefs.

5.4.6 Personal experiences of mothers when sex educating their pre-school children

5.4.6.1 *Ability of mothers to sex educate their pre-school children*

Henscke (1984:3), Lu (1994) and Polulech and Nuttall (1989:3) maintain that parents do not feel equipped to sex educate their pre-school children. They agree that parents feel uncomfortable due to their emotional discomfort to discuss sex. Rozema (1993) further maintains that parental ignorance is the barrier to effective sex education for pre-school children.

The figure below reflects the ability of the mother to sex educate pre-school children.

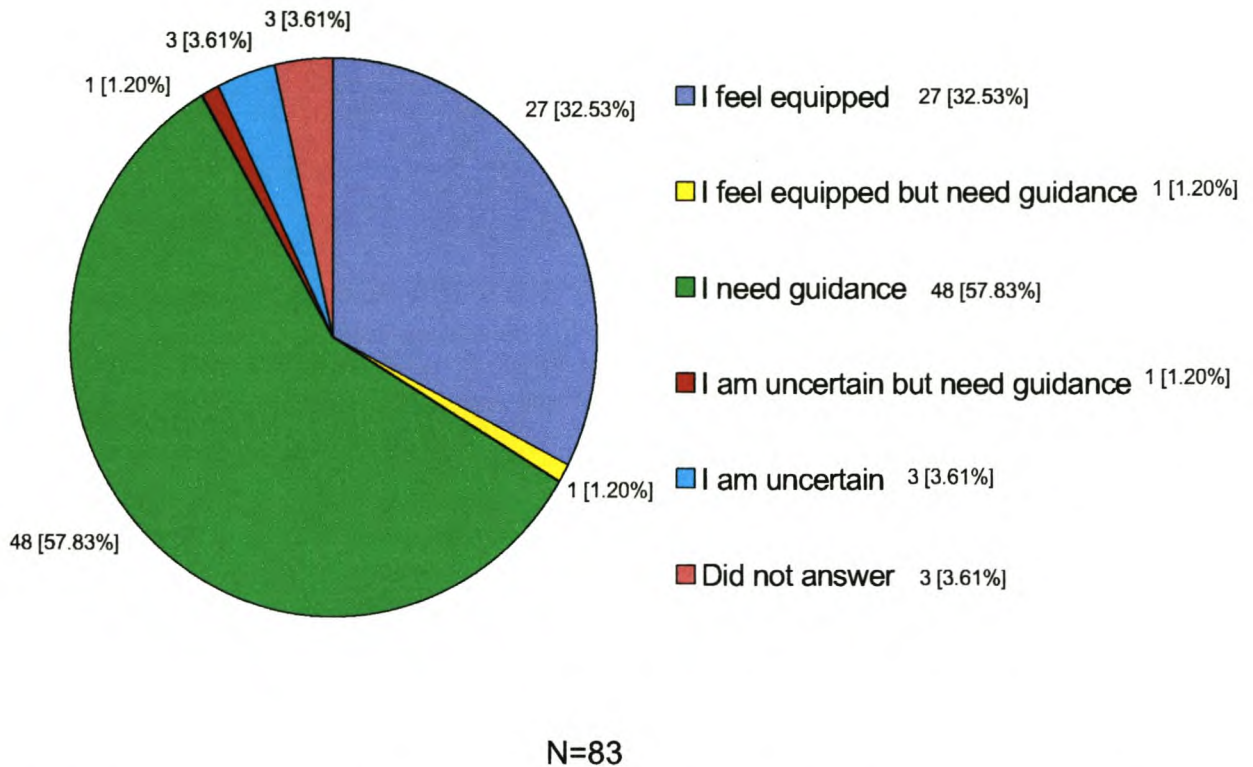


Figure 5-9 Indication of whether mothers feel equipped to sex educate their pre-school children

The findings in Figure 5.9 clearly reflect that the majority of the mothers indicated that they need guidance to sex educate their pre-school children. Of the 83 respondents 27 (32.53%) mothers indicated that they feel equipped to sex educate their pre-school children while 48 (57.83%) mothers indicated that they need guidance. One (1.20%) mother indicated that she feels uncertain and needs guidance, while another (1.20%) mother indicated that she feels equipped but needs guidance. Three (6.02%) mothers indicated that they feel uncertain. This uncertainty was ascribed by respondents to the fact that they have not yet sex educated their pre-school children. Three (3.61%) respondents did not complete the question.

These findings are in accordance with findings of Henscke (1984:3), Lu (1989:3) and Polulech and Nuttall who conclude that parents feel unequipped to sex educate their pre-school children. Schutte (2000:9) claims that training parents to become knowledgeable regarding sexuality and sexual abuse, has resulted in open discussions about these topics and parents feel more confident in discussing these concepts with their children. It can be assumed that the mothers who indicated that they feel equipped to sex educate their pre-school children, had access to relevant information, as there are numerous books available to assist them in sex educating their pre-school children.

5.4.6.2 *Terminology used by mothers*

In order to determine whether mothers use the correct terminology to refer to genitals, 32 (38.55%) mothers indicated that they use the correct names to refer to sex organs while 43 (51.81%) mothers indicated that they use euphemisms. Five (6.02%) mothers reported that they use both correct terminology and euphemisms to refer to sex organs. Three (3.61%) mothers did not answer the question.

These findings prove the statement made by Calderone (1982:29) and Rozema (1987:7) that parents use euphemisms to refer to sexual words. Judging from the responses it is obvious that there is still a negative connotation to sexual vocabulary such as vagina and penis. The use of both correct terminology and euphemisms were ascribed by respondents to the fact that they use euphemisms at home and correct terminology in public.

5.4.6.3 *Level of honesty*

When their pre-school children asked questions about sex related issues, 66 (79.52%) mothers indicated that they answer questions correctly while two (2.41%) reported that they give incorrect explanations. This was followed by six (7.2 %) mothers who reported that they avoid the questions while one mother (1.2%) reported that she occasionally avoids the questions and occasionally answers it correctly. One (1.20%) mother explained that her answer depends on the type of question her pre-school child asks. Seven (8.43%) mothers did not answer the question.

Research (Henscke 1993; Lu 1994 and Rozema 1983) maintains that parents are not a reliable source for sex education. Unlike the study done by Henscke (1993:3), Lu (1994:9) and Rozema (1983:9) the majority (66 mothers or 79.52%) of the mothers supply correct explanations when their pre-school children ask questions about sex. It can be assumed that mothers who are in favour of sex education for pre-school children would answer sex related questions honestly.

5.4.6.4 *Examples used in explaining sex*

Walter and Walter (1993:5) maintain that parents generalise from humans to animals when they sex educate their pre-school children. Calderone (1993:8) explains that parents are confused about their own sexuality and in their relationships they have been unable to deal with sexuality openly and constructively.

In order to determine whether mothers use examples of humans or animals to explain sex, 60 (72.29%) mothers indicated that they use examples of animals to explain sex while a minority of only 12 (14.46%) mothers indicated that they use examples of humans. Eleven (13.25%) did not answer the question. Respondents were requested to indicate why they use examples of animals to explain sex. Thirteen (15.66%) mothers justified using animals to explain sex stating that it is uncomplicated to explain sex by using animal examples, because children see animals mating. One (1.2%) mother indicated that she found it less embarrassing to explain sex by using examples of animals.

These findings are in accordance with statements of Walters and Walters (1993:5) who explained that parents generalise from animals to humans when they sex educate young children. However, this result raises the question why parents use examples of animals to explain sex, when the majority of mothers (68 or 81.93%) indicated that they convey the message to their pre-school children that couples who love each other enjoy having sex. It can be assumed that parents who admit to their children that couples enjoy sex, would feel comfortable to use examples of humans.

5.4.6.5 Sex education and sexual exploration

Friedrich et al (1991) and Gil and Johnson (1993) maintain that parents assume that sex education results in sexual exploration and promiscuity. According to Allensworth (1992) and Baldwin and Bauer (1994) it is a recognized myth that there is a correlation between sex education and sexual experimentations.

Figure 5.10 below reflects whether mothers assume sex education results in sexual exploration.

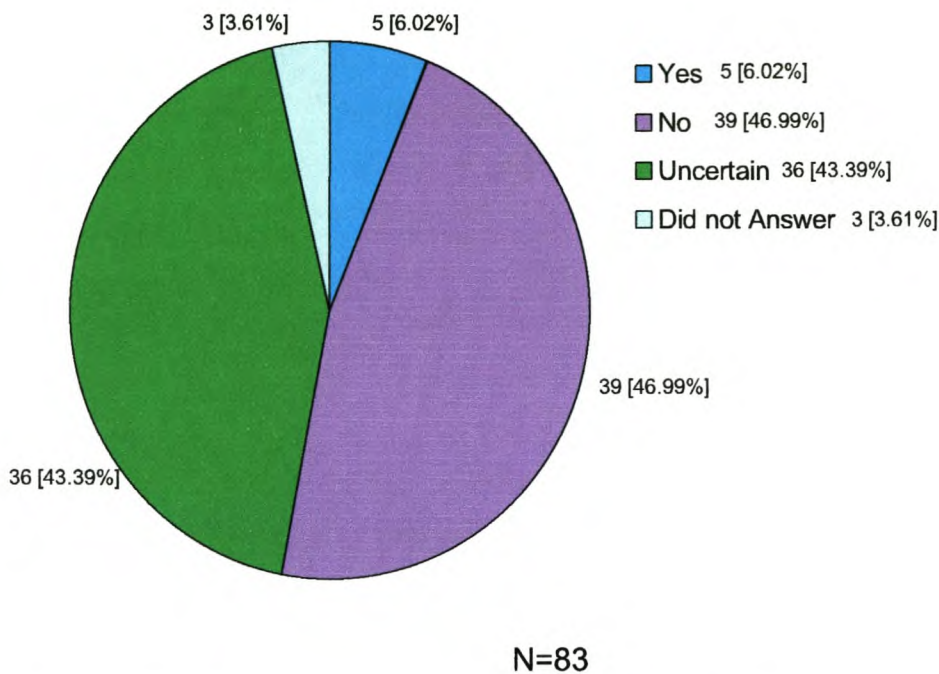


Figure 5-10 Mothers who assume that sex education leads to sexual exploration

These findings in Figure 5.10 indicate that the majority of the respondents do not assume that sex education results in sexual exploration. Of the 83 respondents, 39 (46.99%) mothers indicated that they thought sex education does not lead to sexual experimentation, 36 (43.39%) mothers stated that they are uncertain, while five (6.02%) mothers indicated that sex educating a pre-school child will result in sexual experimentation. Three (3.61%) mothers did not complete the question.

Unlike the studies done by Gil and Johnson (1993), Henscke (1984), Lu (1994), and Rozema (1983), the majority of mothers do not assume sex education results in sexual exploration. In analysing these findings it seems that the mothers who did not

believe sex education for pre-school children will lead to sexual experimentation, also indicated the following: they answer sex related questions correctly; they use human examples to explain sex and they are in favour of pre-schools utilising experts to train parents on parental sex education. The above-mentioned findings also indicate that many mothers are uncertain about the correlation between sex education and sexual exploration.

The respondents were requested to motivate their answers. Three (3.61%) mothers who assumed sex education would result in sexual exploration, reasoned that children re-enact their knowledge. Four (4.82%) mothers felt that sexual information is too interesting for a pre-school child to resist exploration. One (1.2%) mother explained that sex education would result in unnecessary curiosity.

Two (2.41%) mothers who reasoned that sex education does not result in sexual exploration, explained that children watching television do not re-enact what they see, therefore sex educated pre-school children would not re-enact their sexual knowledge. Five (6.02%) mothers explained that value based sex education would not result in sexual exploration. Five (6.02%) mothers felt that when the curiosity of the pre-school child is satisfied by sex education, exploration would be minimized.

In analysing these findings it seems that the majority of mothers do not feel equipped to sex educate their pre-school children. When they do attempt to sex educate their pre-school children, the majority use euphemisms and animals as examples to explain sex. The majority answer sex related questions correctly and recognise that sex education does not result in sexual exploration.

5.4.7 Sexual behaviour of pre-school children

5.4.7.1 *Boundaries for sexual games*

Calderon (1992:27) and Gil and Johnson (1993:79) maintain that the lack of sexual boundaries could result in sexually advanced and inappropriate sexual exploration between pre-school children. Gil and Johnson (1993:81) further maintain that the majority of mothers who do not reinforce sexual boundaries, were victims of sexual abuse and had experienced a similar lack of sexual boundaries in their parental homes. Respondents were requested to indicate whether they reinforce sexual boundaries for sexual games to their pre-school children.

These findings are reflected in Figure 5.11 below.

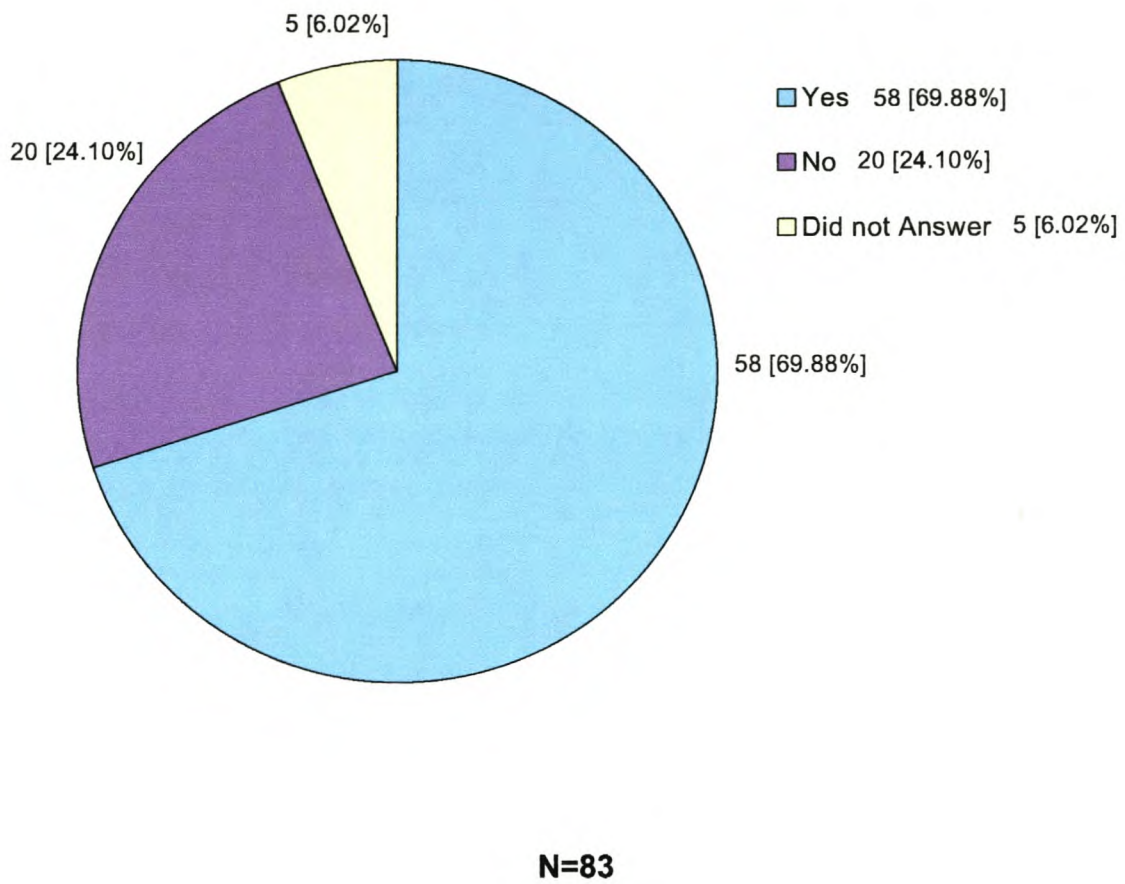


Figure 5-11 Boundaries taught for sex games

The findings in Figure 5.11 clearly indicate that the majority of the mothers teach their pre-school children sexual boundaries. Of the 83 respondents, 58 (69.88) mothers indicated that they teach their pre-school children boundaries for sex games, while a minority of 20 (24.10%) mothers stated that they do not teach their pre-school children boundaries for sex games. Five (6.02%) respondents did not complete the question. The high frequency of mothers that teach their pre-school children boundaries for sex games can be ascribed to the fact that a majority of 81 (97.59%) mothers were not sexually abused as children and subsequently set sexual boundaries for their pre-school children. The four schools in the demarcated area address body privacy in their pre-school syllabus. It can be assumed that the

programme addressing body privacy presented at the pre-schools, could influence the mothers to reinforce boundaries for sexual games at home.

The home environment of the 20 (24.10%) mothers who do not teach their pre-school children boundaries for sexual games, was evaluated to ascertain whether their history and home environment in any way contributed toward the lack of teaching sexual boundaries to their pre-school children. In analysing these findings it seems that a majority (15 or 75%) of the mothers indicated that they would reinforce the sexual boundaries should their pre-school children masturbate. The home environment of these mothers reflected boundaries for nudity and television viewing. Seventeen (85%) of the mothers indicated that their family members are not allowed to walk in the nude at home, and eighteen (90%) do not have pictures of nude people in their homes or allow their pre-school children to watch programmes with an age restriction. All the parents indicated that the only sexual behaviours that were acceptable for pre-school children, were pulling down their own pants and touching their own genitals.

In analysing these findings it seems that there is no correlation between the home environment and the history of the mother and their reluctance to teach their children boundaries for sexual games. Gil and Johnson (1993:93) explain that reinforcing boundaries for sexual games depend on the parents' own experiences with sexual games as a child.

Although the home environment of the parents reflected boundaries for nudity and television viewing, it was noted that when the parents saw their pre-school children

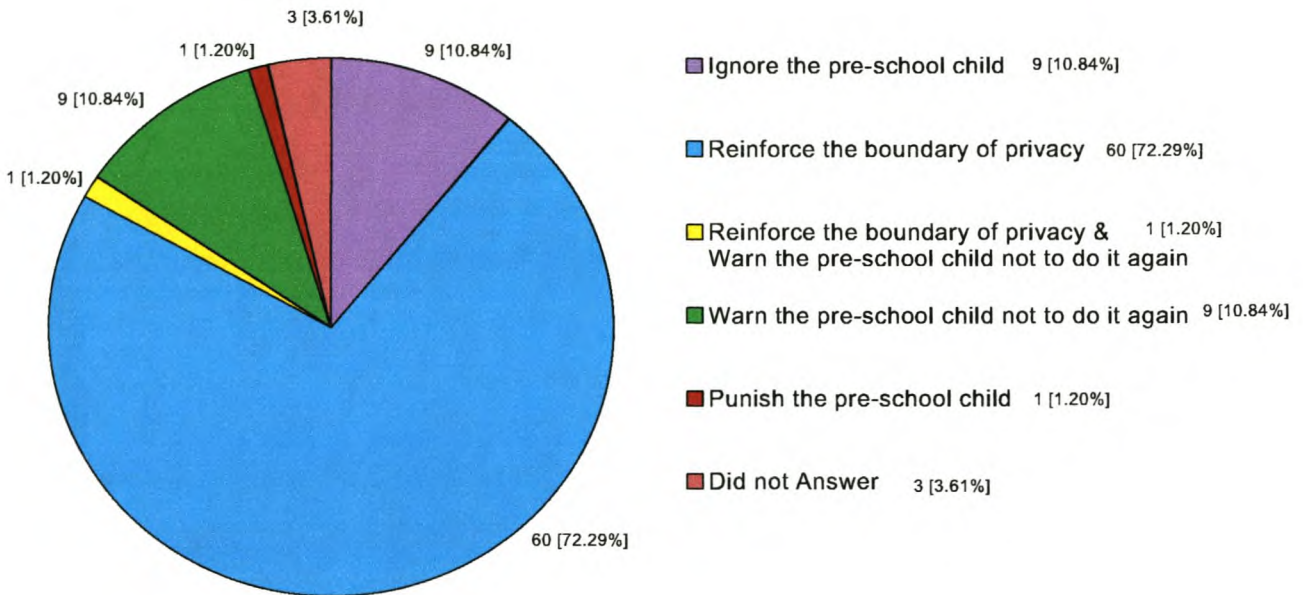
masturbating, they reinforced the boundaries for privacy. It can be assumed that the mothers do not teach sexual boundaries to their pre-school children. They assume the pre-school children will not re-enact sexual intercourse, because they do not experience the desire to have sex. It can further be assumed that, once the mother has sex educated her pre-school children and satisfied their curiosity, there is no need for sexual exploration which require the setting of these boundaries.

5.4.7.2 *Reaction to pre-schooler masturbating*

Gil and Johnson (1993:93) maintain that some mothers are more neutral or positive in their reactions towards masturbation. They simply distract their pre-school children from masturbating in the open or convey the message that touching their own body is acceptable, but preferably in private. Gil and Johnson (1993:93) and Friedrich et al (1991) further maintain that many pre-school children have been threatened with catastrophic outcomes if they continue to masturbate; others have been severely castigated for masturbating openly. Gil and Johnson (1993:93) explain that some mothers seem to have an unusual interest in their pre-school children's masturbatory behaviours and may demonstrate masturbation to achieve orgasm, masturbate their children to orgasm, demonstrate adult sexual intercourse or ejaculation, encourage and observe their children's sexual coitus, or provide children with vibrators so that children can enjoy the pleasures of sexuality.

Respondents had to indicate their reactions when noticing that their pre-school child is masturbating.

These findings are reflected in Figure 5.12 below.



N=83

Figure 5-12 Reaction of mothers regarding masturbation

From Figure 5.12 it appears that sixty (72.29%) of the mothers indicated that if they see their pre-school child masturbating, they will reinforce the boundary for privacy while nine (10.84%) of the mothers indicated that they will ignore their pre-school children's masturbatory behaviours. This was followed by another nine (10.84%) mothers who indicated that they will warn the pre-school children not to masturbate again while one (1.2%) mother stated that she would punish her pre-school child for masturbating. Three (3.61%) respondents did not answer the question. One (1.2%) mother indicated that she will reinforce the boundary of privacy and warn her pre-school child not to do it again.

It can thus be concluded that the majority of the mothers (61 or 73.49%) will reinforce the boundary for their child's masturbatory behaviours while the remaining mothers will have various reactions depending on their own experiences with masturbation. These findings are in accordance with the statement made by Gil and Johnson (1993:93) who emphasise that depending on the parents' own experiences with masturbation, they differ in their ability or willingness to observe, allow, or intervene in their pre-school children's masturbatory behaviours.

5.4.7.3 *Emotions of the mother to pre-schooler masturbating*

Lu (1994) maintains that parents respond with shock when they discover that their pre-school children masturbate. According to Gil and Johnson (1993:93), parents continue to feel uncomfortable when pre-school children masturbate openly.

Respondents were requested to indicate their emotions when they observed their pre-school children masturbating. Thirty nine (46.9%) mothers indicated that they felt uncomfortable, 32 (38.5%) mothers indicated that they feel neutral and 8 (9.6%) mothers indicated that they were shocked when they observed their children masturbating. Four (4.82%) respondents did not complete the question. Respondents were also requested to describe other emotions they experienced when they noticed their pre-school child masturbating. One (1.2%) mother explained that she was shocked because she was unable to intervene. Two (2.41%) mothers described that they felt guilty because they do not spend enough time with their pre-school children.

One (1.2%) mother indicated that she was brought up with the perception that masturbation is improper.

Because only 8 (9.6%) mothers indicated that they reacted with shock, these findings are in contrast to the observation made by Lu (1994) that parents respond with shock when they notice their pre-school child masturbating. A majority of the mothers (39 or 46.9%) indicated that they feel uncomfortable, which confirms the statement made by Gil and Johnson (1993:93) that parents feel uncomfortable about their children masturbating.

5.4.7.4 Acceptable sexual exploration for pre-school children

Calderone (1992:27), Gil and Johnson (1993:93); Henscke (1984:1-8), Polulech and Nuttall (1988:5) and Rozema (1983) maintain that parents fail to teach their children sexual boundaries and sex education, which results in sexual experimentation amongst pre-school children. Gil and Johnson (1993) further maintain that parents too often minimise harmful or dangerous sexual behaviours between pre-school children or they identify age-appropriate sexual behaviours as something alarming, deviant or warranting punishment.

The respondents were requested to indicate which sexual behaviours they perceive as age-appropriate or deviant.

The data obtained is reflected in Table 5.1 below.

Table 5-1 Sexual behaviours which parents find acceptable for pre-school children

Acceptable Sexual Behaviours	Answer							
	Yes		No		No Answer		Totals	
	f	%	f	%	f	%	f	%
Touching their own genitals	75	90.36	5	6.02	3	3.61	83	100
Touching the genitals of a friend	2	2.41	72	86.75	9	10.84	83	100
Pulling down their own pants	34	40.96	40	48.19	9	10.84	83	100
Pulling down the pants of a friend	2	2.41	70	84.34	11	13.25	83	100
Pretending dolls are having sex	14	16.87	61	73.49	8	9.64	83	100
Simulating sex on a friend	1	1.20	73	87.95	9	10.84	83	100
Kissing a friends genitals	1	1.20	73	87.95	9	10.84	83	100

N=83

From the above table it can be concluded that 75 (90.36 %) mothers indicated that they feel it is acceptable for their pre-school children to touch their own genitals, while 5 (6.02%) mothers indicated that it is not acceptable. Seventy-two (86.75%) mothers indicated that they feel it is not acceptable for pre-school children to touch the genitals of a friend, while two (2.41%) mothers indicated that it is acceptable. Forty (48.19%) mothers indicated that it was not acceptable for pre-school children to pull down their own pants, while 34 (40.96%) mothers indicated that it is acceptable. Seventy (84.34%) mothers indicated that it is not acceptable for pre-school children to pull down the pants of their friends, while two (2.41%) mothers indicated that it is normal. Sixty-one (73.49%) respondents indicated that they feel it is not acceptable for pre-school children pretend that their dolls are having sex, while 14 (16.87%) mothers indicated that they felt it is acceptable. Seventy-three (87.95%) respondents indicated that they feel it is unacceptable for pre-school children to simulate sex with

a friend, while one (1.2%) indicated that it is acceptable. Seventy-three (87.9%) mothers indicated that it is unacceptable for pre-school children to kiss each other on the genitals while one (1.2%) mother indicated that it is acceptable. Seventy-five (90.36%) mothers completed most of the questions and nine (10.84%) mothers did not complete this table. The reason for the respondents not completing the table, is unclear. It can be assumed that they did not have enough time available to complete the questionnaire prior to the parents' meeting or that they were not interested in completing the questionnaire.

In analysing these findings, it seems that mothers could correctly identify normal or acceptable sexual behaviour for pre-school children. The only sexual behaviours listed in the table, which are defined by experts (Friedrich et al, 1991; Gil and Johnson, 1993; Johnson, 1995) as inappropriate for pre-school children, are simulating sex with a friend or kissing the genitals of a peer. Only one (1.2%) mother indicated that she perceived pre-school children kissing each other's genitals as normal. These findings are in contrast to the statement made by Gil and Johnson (1993) that parents are not knowledgeable about the normal sexual behaviour of pre-school children.

From the above table it is clear that the mothers have a conservative expectation for their pre-school children's sexual behaviours. There was a general agreement that pre-school children are allowed to touch their own genitals, but should not touch the genitals of others, or simulate sex with dolls or a friend. A minority of the mothers (34 or 40.9%) indicated that it was not acceptable for pre-school children to pull down the pants of a friend. A majority of the mothers (73 or 87.9%) agreed that it is

unacceptable for children to kiss each other on the genitals. Gil and Johnson (1993:23) maintain that it is unlikely that the sexual play of pre-school children will progress beyond what the children have experienced. It could be assumed that, as a result of neutral home environments and the reinforcement of sex education and sexual boundaries, it is unlikely that mothers would tolerate advanced sexual behaviours.

The mothers whose responses reflected a sexualised home environment also indicated that it is normal for pre-school children to show the following sexual behaviours: touching the genitals of friend, simulating sex with a friend, pretending that their dolls are having sex or kissing the genitals of a friend. These mothers indicated that there are no boundaries for nudity in the homes, pictures of nudity are available and the pre-school children are allowed to watch programmes with an age restriction for nudity or sex. These results correlate with research by Friedrich (1994) and Gil and Johnson (1993), which indicate that there is a correlation between a sexualised home environment and problematic sexual behaviour in children.

5.4.7.5 Attitudes reflected to the pre-school child regarding sex

Calderone (1983:5) explains, that because of the multiplicity of the factors that have an impact on parents' sexual lives, it is possible for parents to become confused in the sexual attitudes which they reflect to their children. Walters and Walters (1983:8) maintain that in order to avoid embarrassment, parents convey to their pre-school children the idea that married couples have sex to procreate.

The respondents were requested to indicate their attitudes regarding sex, as reflected to their pre-school children. Respondents could also describe their personal attitudes. Sixty eight (81.93%) of the mothers indicated that they teach their pre-school children that couples who love each other, enjoy having sex. This was followed by four (4.82%) mothers indicating that couples have sex to make a baby and four (4.82%) mothers stating that they inform their pre-school children about their preference not to talk about sex. Seven (8.43%) mothers did not answer the question.

From the findings it was evident that mothers convey to their pre-school children the idea that couples who love each other, have sex. These findings are in contrast to the observation of Walters and Walters (1983:8) that parents teach their pre-school children that couples have sex to procreate.

5.4.8 The role of the school in sex education for pre-school children

Allensworth (1992) and McCormick and Boyer (1981) maintain that parents feel incompetent to sex educate their pre-school children because they lack the knowledge and skills. Feeling unequipped to sex educate their children, they rely on the school to take over this parental responsibility. Schutte (2000:9) maintains that schools should be part of a prevention structure to facilitate information to pre-school children and their parents regarding sex education.

The researcher wished to determine whether parents are in favour of school sex education programmes for pre-school children and whether experts should be utilised

to facilitate these programmes. Respondents were requested to motivate their answers as to why the school should reinforce sex education for pre-school children.

These findings are reflected in Table 5.2 below.

Table 5-2 Views of parents on school sex education programmes

Parent's views on school sex education programmes	Answer									
	Yes		Uncertain		No		No Answer		Totals	
	f	%	f	%	f	%	f	%	f	%
Pre-school should reinforce sex education	64	77.11	11	13.25	4	4.82	4	4.82	83	100
Pre-school should utilise experts to train parents	76	91.57	2	2.41	2	2.41	3	3.61	83	100

N=83

Table 5.2 reflects that 64 (77.11%) mothers indicated that pre-schools should reinforce sex education to the pre-school children while four (4.8%) mothers indicated that pre-schools should not reinforce sex education. Eleven (13.25%) mothers indicated that they feel uncertain. Seventy six (91.57%) respondents indicated that the pre-school should utilise experts from outside to train parents on how to sex educate their pre-school children while two (2.41%) mothers indicated that the school should not make use of experts from outside to train parents. Two (2.41%) mothers indicated that they were uncertain. Fifteen mothers did not complete the question.

In analysing these findings it can be concluded that the majority (64 or 77.11%) of the mothers demonstrated that pre-schools should reinforce sex education to pre-school children. These findings correspond to the findings of Young and Seidensticker (1993:3) who maintain that parents are in favour of school sex education programmes for pre-school children. Respondents motivated this by providing the following information: Four (4.82%) mothers indicated that sex education should be a joint responsibility between parent and school. Two (2.41%) mothers felt that more information could be covered if both school and parent shared the responsibility of sex educating pre-school children. One (1.2%) mother stated that the process of sex education would be a continuous process if it was shared by the school and the parents. Two (2.41%) mothers indicated that school sex education would force the teachers to become educated as they lack general information regarding child sexuality. One (1.2%) mother explained that the school should reinforce the physical aspect of sexual intercourse, while the parents can explain the emotional side of sex. One (1.2%) mother indicated that teachers have more authority over children and should therefore sex educate the pre-school children. Five (6.02%) mothers explained that the children would benefit if all the children received the same exposure to sex education. One (1.2%) mother felt that it is easier to explain sex in a group as opposed to individual parental sex education. One (1.2%) mother suggested that mothers should have access to the sex education syllabus for pre-school children.

It can be assumed that parents who sex educate their pre-school children would not be opposed to school based sex education for pre-school children, because the information regarding sex will be reinforced and not introduced to the pre-school

children. However, the principal of a local school outside the demarcated area, has revealed to the researcher that she wishes to introduce a sex education programme to the pre-school children, but lacks the support of the parents. It can be assumed that the education level of the parents influences their support for school sex education programmes (Finkelhor, 1979; Friedrich, 1984; Gil and Johnson, 1993; Wurtele, 1993; Young and Seidensticker, 1993). It also seems that pre-schools cannot expect the average parent to support sex education programmes without prior education of the parents on the importance of sex education programmes. The pre-school must take the initiative to market sex education programmes to the parents.

Most (48 or 57,83%) mothers indicated that they do not feel equipped to sex educate their pre-school children, and as expected, an overwhelming majority (76 or 91.5%) indicated that pre-schools should utilise experts from outside to train parents on how to sex educate their pre-school children.

It is meaningful to note that the discrepancy in the results reflects that the majority of parents have sex educated their children, although they have indicated that they do not feel equipped to sex educate their pre-school children. It can be assumed that the parents who require guidance to sex educate their pre-school children need validation and additional information regarding parental sex education for pre-school children.

5.4.9 The influence of the home environment on the sexuality of the pre-school child

Erooga and Masson (1999:86-88) and Gil and Johnson (1993:117) maintain that the home environment is important in the sexual socialisation of pre-school children. The manner in which sex and sexuality is expressed in the home influences the sexual development of the pre-school child. According to Friedrich et al (1993), the home environment is directly related to the sexual behaviours of pre-school children.

Respondents were requested to indicate the boundaries in their home environment. The aim was to determine the correlation between the acceptable sexual behaviours of the pre-school children and the home environment of the mothers.

These findings are reflected in Table 5.3 below.

Table 5-3 Behaviours in the home environment

Behaviour in the home environment	Answer							
	Yes		No		No Answer		Totals	
	f	%	f	%	f	%	f	%
A patriarchal belief system in the home	4	4.82	72	86.75	7	8.43	83	100
Family members do not walk in the nude in the home besides in the bathroom and the bedroom	11	13.25	71	85.54	1	1.20	83	100
Children are allowed to play in the nude	13	15.66	66	79.52	4	4.82	83	100
Children are allowed to swim in the nude at home	26	31.33	53	63.86	4	4.82	83	100
Pictures of nude (not art) people in the home.	3	3.61	79	95.18	1	1.20	83	100
Doors are closed when having sex with the partner	71	85.54	11	13.25	1	1.20	83	100
Pre-school children allowed to watch "soapies" on television	23	27.71	56	67.47	4	4.82	83	100
Pre-school children allowed to watch programmes with an age restriction for nudity	6	7.23	74	89.16	3	3.61	83	100
Pre-school children allowed to watch programmes with an age restriction for sex	4	4.82	76	91.57	3	3.61	83	100

N=83

From the above table it can be concluded that the majority of the mothers (72 or 86.75%) indicated that their homes do not have a patriarchal belief system and 4 (4.82%) of mothers indicated that their home environment has a patriarchal belief system. Seven mothers did not answer the question. Finkelhor (1979:23) maintains

that in a patriarchal family women have no power and total obedience is expected. It is expected of mothers with high education levels not to be subservient to their husbands. Three of the four mothers who have a patriarchal belief system in their home obtained a Matric Certificate and two (50%) were sexually abused. The only two mothers who were sexually abused have patriarchal belief systems in their homes. This finding proves the statement by Finkelhor (1979:23) that children in homes with a patriarchal belief system are often sexually abused.

Gil and Johnson (1993:111) maintain that nudity in sexually neutral home environments should be limited to the bathroom and bedroom. Seventy-one (85.54%) mothers indicated that family members do not walk in the nude in the home except in the bathroom and bedroom, while 11 (13.25%) mothers indicated that family members do walk in the nude at home. One mother did not complete the question. It can thus be concluded that the majority (71 or 85.54%) of the mothers provide a sexually neutral home environment for their pre-school children. Sixty-six (79.52%) mothers indicated that they do not allow their pre-school children to play in the nude, while 13 (15.6%) mothers indicated that they do allow their pre-school children to play the nude. Four mothers did not complete the question. The 79 (95.18%) mothers who indicated that nudity is restricted to the bathroom and bedroom also prevent their pre-school children from playing in the nude and indicated that the only sexual behaviours they perceive as acceptable for pre-school children, are to touch their own genitals and to pull down their own pants. This finding proves the statement by Gil and Johnson (1993:27) that children from sexually neutral homes (limiting nudity to the bathroom and bedroom) show minimal sexual behaviour compared to those who come from sexualised home environments. Fifty-three (63.86%) mothers

indicated that they do not allow their pre-school children to swim in the nude, while 26 (31.33%) mothers indicated that they do allow their pre-school children to swim in the nude. Four mothers did not complete the question. The eleven (13.24%) mothers who do not restrict nudity to the bathrooms and bedrooms indicated that they find it acceptable for pre-school children to touch the genitals of their friends and to swim in the nude. The mothers who allow their pre-school children to swim in the nude indicated that it is acceptable for their children to pretend that their dolls are having sex.

Judging from the responses, a correlation between the boundaries for nudity in the home environment and the sexual behaviours which mothers perceive as being acceptable for pre-school children, was found in this study.

Seventy-nine (95.18%) mothers indicated that they do not have pictures of nude people in their homes while three (3.61%) mothers indicated that they do have pictures of nude people in their home. One (1.2%) mother did not complete the question. The 71 (91.1%) mothers who indicated that they limit nudity in the home to the bathroom and bedroom do not have pictures of nude people in their homes. The three (3.6%) parents who have pictures of nude people in their homes, also allow their pre-school children to play in the nude.

A majority of the mothers (71 or 85.54%) indicated that they close the door when they have sex with their partner, while 11 (13.25%) mothers indicated that they do not close the door when they have sex. One (1.2%) mother did not answer the question. It is probable that mothers who limit nudity in the home to the bathrooms

and bedrooms, and who expect minimal sexual behaviours from their pre-school children, have sex in privacy.

Fifty-six (67.47%) respondents indicated that they do not allow their children to watch “soapies” on television, while 23 (27.71%) mothers indicated that they do allow their pre-school children to watch “soapies”. Four mothers did not complete the question. Five (6.02%) mothers explained that their pre-school children watch “soapies” with the rest of the family while they prepare supper.

Seventy-four (89.16%) mothers indicated that their pre-school children do not watch programmes on television with an age restriction for nudity, while 6 (7.23%) mothers indicated that they do allow their pre-school children to watch programmes with an age restriction for nudity. Three (3.61%) mothers did not answer the question.

Seventy-six (91.57%) mothers indicated that their pre-school children do not watch programmes on television with an age restriction for sex, while 4 (4.82%) mothers indicated that they do allow their pre-school children to watch programmes with an age restriction for sex. Three (3.61%) mothers did not complete the question. One (1.2%) of the mothers who allows her pre-school child to watch programmes with an age restriction for sex, also indicated that it is normal for pre-school children to kiss each other on the genitals. The remaining 3 (3.61%) mothers who allow their pre-school children to watch programmes with an age restriction for sex, indicated that they limit nudity in the home and limit sexual behaviours for pre-school children to touching their own genitals and pulling down their own pants. There were no

correlations between the programmes these children are allowed to watch and the boundaries for nudity in the home environment.

In analysing these findings it seems that there is no correlation between the television programmes the pre-school children are allowed to watch and their sexual behaviours. However, there is a correlation between the boundaries for nudity in the house and the sexual behaviour of the pre-school children. These findings are in accordance with findings of Finkelhor (1979), Friedrich et al (1991) and Gil and Johnson (1993) who concluded that nudity in the home is directly related to the sexual behaviours of children.

5.5 SUMMARY

The research findings discussed in this chapter clearly indicate the correlation between the boundaries for nudity in the home environment and the sexual behaviours mothers perceive as acceptable for pre-school children. These findings are in accordance with findings from other studies dealing with this topic. The study also revealed that the level of academic qualification has an influence on whether mothers sex educate their pre-school children or not. Most mothers indicated that they sex educate their pre-school children and they agree that the responsibility lies with the parent. This study shows that mothers are in favour of pre-schools to facilitate a parent orientated sex education programme, which would promotes parental sex education for pre-school children

CHAPTER 6

Conclusions and recommendations

6.1 INTRODUCTION

Sexual abuse has devastating emotional and behavioural effects on pre-school children. If sexual abuse can be prevented, it eliminates both the traumatic experiences of the child relating to the abuse, as well as the professional intervention it may entail. Schutte (2000:9) maintains that classroom based prevention education for pre-school children is not enough. Schutte (2000) also recommends the implementation of a prevention structure, which involves the parent, teacher and the social worker. Prevention strategies, based on sex education, a neutral home environment and a safe environment for disclosure of molestation, should be facilitated by social workers to parents and teachers.

The first objective was to describe the nature and extent of parental sex education given to pre-school children. The second objective was to investigate the acceptability of a sex education and safety programme for parents of pre-school children as part of the school curriculum. The third objective was to describe the physical and sexual boundaries existing in the home environment of parents of pre-school children. The final objective was to determine the sexual behaviours of pre-school children, which are regarded as acceptable by their parents.

A literature review on the sexual development of the pre-school child and the influence of the home environment on the sexual development of the pre-school child, was discussed in chapters two and three respectively. In chapter four the extent of sex education at schools and at home was investigated, and preventative measures to be implemented at pre-school level, were discussed. The four objectives were attained in chapter five.

As sex education for pre-school children is such a sensitive issue and complex phenomenon and influenced by various social norms as well as personal attributes and experiences, it cannot be fully understood after such a relatively short period of empirical investigation based on a biased study population. The researcher has however, reached certain conclusions as a result of the literature review and empirical study, and various recommendations will be made.

6.2 CONCLUSIONS

The following conclusions based on the findings of the study, have been drawn.

6.2.1 Personal features that influence mothers to sex educate their pre-school children

Based on earlier studies and the findings of this study, the conclusion is drawn that there is a correlation between mothers who sex educate their pre-school children and their academic achievement. The higher the academic achievements of the mother,

the more likely she will be to sex educate her pre-school child. Earlier studies indicated that parent orientated sex education for pre-school children are consistently associated with the academic qualification, marital status, age and number of children of the mother. In this profile, most of the mothers in the study population were married with two or three children, and they sex educated their pre-school children. These findings lead to the conclusion that the average married mother with two or three children and who has completed her school career, is likely to sex educate her pre-school child. However, this profile is not necessarily accurate because of the over- representation of respondents who fit this profile.

6.2.2 Sex education received by the mothers

Based on the findings of the study, the conclusion is drawn that the main source of sex education for the study population was provided by their mothers, during their senior primary school years. However, the mothers were not perceived as a reliable resource for sex education due to their discomfort and anxiety regarding sex. Those who received sex education from their mothers had a more positive first impression of sex compared to those who were sex educated by friends or the media. The mothers who had a positive first impression of sex, also sex educated their pre-school children. In contrast to these findings, previous studies indicate that friends or the media more often inform children about sex, which results in a negative impression of sex.

Comparing the findings of this study with the retrospective reports on sex education, the conclusion is drawn that parents sex educate their children at a younger age as

compared to a generation ago. Parental sex education occurred simultaneously with the sexual liberalisation in South Africa. As a result of the social changes in the country, public sex education awareness campaigns do exist.

6.2.3 Attitude of mothers on sex education for pre-school children

Based on the findings of this research, it can be concluded that mothers are in favour of sex educating their pre-school children and in providing the appropriate answers to sex related questions. Although they do not assume that sex education for pre-school children will lead to sexual experimentation, many mothers felt ambiguous as the result of the myth that sex education for young children results in sexual exploration.

Mothers believe that the responsibility to sex educate a pre-school child lies with the parent, but feel a prevention programme should be reinforced at school. Mothers convey to their children that couples who love each other have sex, but to conceal their embarrassment, they continue to use animals as examples to explain sex and use euphemisms to refer to genitals.

From the survey results, it can be concluded that mothers feel unequipped to sex educate their pre-school children and require information and guidelines from the school.

6.2.4 Awareness and reaction to sexual behaviours of the pre-school child

Based on the findings, it can be concluded that mothers are familiar with normal and problematic sexual behaviours of pre-school children. To ensure that their pre-school children act appropriately, mothers convey boundaries for bodily exploration and sexual games. Although mothers feel uncomfortable observing their pre-school child masturbating, they respond by reinforcing the sexual boundaries.

6.2.5 Effect of the home environment

From the survey results, it can be concluded that the home environments of pre-school children are generally neutral which implies that there are boundaries for nudity, and pre-school children are adequately supervised and prevented from watching television programmes with age restrictions for nudity and sex. In analysing the home environment and the acceptable sexual behaviours of the pre-school children, it can be concluded that parents from a neutral home environment expect only the normal sexual behaviours from their pre-school children, (touching their own genitals and pulling down their own pants or the pants of a friend). The parents from sexualised homes (no boundaries for nudity, children are not adequately supervised and children are allowed to watch television with an age restriction for sex and nudity), allow advanced and problematic sexual behaviour of their pre-school children.

6.2.6 Implementation of a parent orientated school sex education programme for pre-school children

From the survey results, the conclusion is drawn that the mothers are in favour of the implementation of a parent orientated sex education programme that would empower them to sex educate their pre-school children at home. They are also in favour of a classroom-based sex education programme for the pre-school children which would reinforce what is done at home. The mothers are in favour of utilising experts to facilitate the process of implementation of such a programme.

6.3 RECOMMENDATIONS

The following recommendations are made, based on the conclusions.

6.3.1 Pre-school staff

It is recommended that the following should be considered at management level in pre-schools

- A parent orientated sex education and safety programme should be utilised to assist parents and teachers of pre-school children to gain a knowledge base regarding child sexuality and guidelines to assist parents in sex educating their pre-school children. The parents should be guided in creating a neutral home environment to secure the healthy sexual development of the pre-school child, as well as a safe home environment in which the child can live and find support for disclosure in the event of molestation.

- A classroom based sex education and personal safety programme should be implemented to reinforce sex education and personal safety of the pre-school children. This programme should be introduced to four-year-old pre-school children on a yearly basis. More age-appropriate information should be added to this programme each year.
- Available resources for assistance in sex education, or assistance for victims of molestation, should be adequately publicised so that parents will know whom to approach when they are faced with a problem. Names of contact persons should be readily available.
- The staff of the school should endeavour to clarify the extent of molestation and problematic sexual behaviour and should convey the seriousness of it to the parents.

6.3.2 Social workers

It is recommended that social workers should consider the following:

- Implementing and facilitating a preventative network in pre-schools, which should consist of the following people: the social worker as initiator, the teacher, and the parent. The social worker has the knowledge base regarding sexual abuse and she/he should facilitate involvement from the teacher and parent in order to share information and to be available to the pre-school child.

Linking and interdependence is of vital importance in the prevention of molestation.

- Researching, developing and improving on existing sex education and safety programmes for pre-school children.
- Launching a creative national publicity campaign to promote the benefits of parent orientated sex education for pre-school children in order to facilitate awareness amongst pre-schools and parents.
- Establishing extremely high visibility on the issue of parent sex education for pre-school children and acquiring the status of being compulsory at pre-school level, enforced by the Department of Education.
- Considering the development of, or assisting in the development of a programme as part of the curriculum of pre-school student teachers, which includes child sexuality, sex education and the prevention of molestation.

6.4 FURTHER RESEARCH

It is recommended that:

- Future research should examine what is perceived by parents as successful sex communication with pre-school children. This research study has not adequately examined the actual techniques used by parents to sex educate

their children. Strategies for effective parent sex communication need to be identified and compared to existing communication perspectives defining effective parent sex communication with pre-school children. Parents who appear to be effectively sex educating their pre-school children should be invited to share their knowledge and skills to pursue this objective. The direct behavioural link between prevention of molestation and effective parent orientated sex education needs to be scrutinised. Indirect links exist, both in this research study and others, but convincing evidence should be researched.

- Future research should address the development of a parent orientated sex education programme for parents with pre-school children, especially aimed at illiterate parents or parents with minimal school qualifications. This programme should be appropriate for the broader population.

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Appendix 1

Questionnaire

University of Stellenbosch

Department of Social Work

Sexual education for pre-school children by their parents

Instructions: **Mothers** must fill out the questionnaire about their oldest pre-school child.

Questionnaire Number	
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1. Identifying information of Mother

1.1 What is your highest academic qualification?

Did not complete high school	
Matric certificate	
Post matric certificate	
Post matric diploma	
Degree	

1.2 What is your marital status?

Never married	
Separated	
Divorced	
Married	
Remarried	
Widowed	

1.3 How old are you?

20 – 25	
26 - 30	
31 - 35	
36 - 40	
41 - 45	
46 - 50	
Older than 50	

1.4 How many children do you have?

1	
2	
3	
4	
5 or more	

2. Information regarding your pre-school child

2.1 How old is your pre-school child?

4	
5	
6	
Other	

2.2 What is the gender of your pre-school child?

Male	
Female	

2.3 What is the order of your pre-school child?

Oldest	
Middle	
Youngest	

2.4 Who looks after your pre-school child in the afternoons?

Parent	
Formal aftercare at school	
Au pair	
Maid	
Family member (e.g. aunt, grandparents)	
Friend	

3. Your own education about sexuality

3.1 How did you first learn about sex?

Informed by mother	
Informed by father	
Informed by sibling	
Informed by friend	
Other adult	
School sex education programme	
Reading books or magazines	
Through personal experience or abuse	

3.2 How would you classify your first impressions of sex?

Positive	
Negative	
Neutral	

3.3 When you were a child did you ask your parents questions about sex?

Yes	
No	

3.4 If you asked your parents questions about sex, how did they react to the questions?

Dismissed you without answering the question	
Answered just your question	
Answered more than just your question	
Answered your question and invited you to ask more questions	
Tried to ignore the question	

3.5 Do you think your parents were a reliable source for sex education?

Yes	
No	

3.6 To your best recollection, how old were you when you learnt about sex?

Pre-school	
Junior primary school (sub 1 to std 1)	
Senior primary school (std 2 - 5)	
Senior school	
After school	

4. Sex education for pre-school children

4.1 General attitudes and beliefs

4.1.1 Do you think pre-school children should be sex educated?

Yes	
No	
Uncertain	

4.1.2 If your answer is yes, whom you think should sex educate them?

Parents	
Pre-school staff	
Friends	
Other	

4.1.3 If you believe a pre-school child should not be sex educated, which of the following statements reflects your belief the best?

Pre-school children are too young to learn about sex	
Sex is too complicated for a pre-school child to understand	
I am afraid of frightening the child with detail about sex	
Children will learn about sex through their normal experiences	
I have not thought about sex education	

Do you have any other beliefs? _____

4.2 Personal experiences of teaching a pre-school child about sex

4.2.1 Do you feel equipped to sex educate your pre-school child or do you need guidance.

I feel equipped	
I need guidance	
I am uncertain	

4.2.2 Do you refer to sex organs using the correct names or do you use slang?

I use the correct names	
I use slang e.g. "fanny" or "winkie"	

4.2.3 When your pre-school child asks a sex related question, do you

Answer it correctly	
Give incorrect explanations	
Avoid it	

4.2.4 Do you use examples of how animals mate to explain sex?

Yes.	
No.	
Uncertain if I will because I have not sex educated my children.	

4.2.5 If your answer to Question 4.2.4 is yes, why do you use examples of how animals mate?

It is less embarrassing	
It is easy to explain because children see animals mate	
I was taught that way	

4.2.6 Do you think sex education of a pre-school child will lead to sexual experimentation?

Yes	
No	
Uncertain	

Motivate your answer _____

5. Sexual behaviour of pre-school children

5.1 *Do you teach your pre-school child boundaries (rules) for sex games like “doctor, doctor” for instance “do not touch your friend’s genitals or do not put something in your friend’s vagina or bottom”.*

Yes.	
No.	

5.2 *What would you do if you saw your pre-school child masturbating?*

Ignore my pre-school child	
Reinforce the boundary of privacy	
Warn the pre-school child not to do it again	
Punish my pre-school child	

5.3 *How would you feel if you saw your pre-school child masturbating?*

Feel shocked	
Feel neutral	
Feel uncomfortable	

Describe other emotions you would feel _____

5.4 *Which of the following manners of sexual exploration do you feel is acceptable for a pre-school child?*

Touching their own genitals	YES	NO
Touching the genitals of a friend	YES	NO
Pulling their own pants down	YES	NO
Pulling down the pants of a friend	YES	NO
Pretending dolls are having sex	YES	NO
Simulating sex on a friend	YES	NO
Kissing a friend's genitals	YES	NO

5.5 *Which of the following attitudes regarding sex are you reflecting to your children?*

Couples who love each other enjoy sex	
Couples have sex to make a baby	
Parents don't have sex	
Sex is a bad thing	
Sex is something you don't like to talk about	

Are there other attitudes? _____

6. The role of the school in sexual education of pre-school children

6.1 Do you think the pre-school should reinforce sex education?

Yes	
No	
Uncertain	

Motivate your answer _____

6.2 Do you think the pre-school should utilise experts to train parents on how to sex educate their pre-school children.

Yes	
No	
Uncertain	

7. The influence of the climate in the home on the sexuality of the pre-school children

Do you have a patriarchal belief system in your home, which means that women are subservient to men?	YES	NO
Do family members walk in the nude in your home besides in the bathroom and the bedroom?	YES	NO
Do you allow your children to play in the nude?	YES	NO
Do you allow your children to swim in the nude at home?	YES	NO
Do you have pictures of nude (not art) people in your home?	YES	NO
Do you close the door when you have sex with your partner?	YES	NO
Do you allow your pre-school child to watch "soapies" on television?	YES	NO
Do you allow your pre-school child to watch programmes with an age restriction for nudity?	YES	NO
Do you allow your pre-school child to watch programmes with an age restriction for sex?	YES	NO

Thank you very much for your friendly co-operation.